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STATE OF NEW YORK

Twenty-Second Annual Report

00-100

Managers and Officers

00-100

Craig Colony for Epileptics

Seneca, Livingston County, N. Y.

TRANSMITTED TO THE LEGISLATURE JANUARY 5, 1916.

1915
CRAIG COLONY
LIVINGSTON COUNTY
NEW YORK

STATE OF NEW YORK

Twenty-Second Annual Report

OF THE

Managers and Officers

OF THE

Craig Colony for Epileptics

Sonyea, Livingston County, N. Y.

TRANSMITTED TO THE LEGISLATURE JANUARY 5, 1916

ALBANY
J. B. LYON COMPANY, PRINTERS
1916

STATE OF NEW YORK

No. 8

IN SENATE

JANUARY 5, 1916

TWENTY-SECOND ANNUAL REPORT

OF THE

MANAGERS AND OFFICERS OF THE CRAIG
COLONY FOR EPILEPTICS, SONYEA,
LIVINGSTON COUNTY, N. Y.

JANUARY 3, 1916

To the Legislature:

By direction of the Board of Managers, I have the honor to transmit herewith to the Legislature the Twenty-second Annual Report of the Craig Colony for Epileptics.

PERCY L. LANG,
President of Board of Managers.

[3]

GENERAL INFORMATION

The Craig Colony for Epileptics is located at Sonyea in Livingston county, New York State, 70 miles southeast from Buffalo and 40 miles south from Rochester.

The Colony is maintained solely by State appropriations. The Colony was named in honor of the late Oscar Craig of Rochester, N. Y., President of the State Board of Charities at the time it was founded in 1894. The first patient was admitted in January, 1896.

From New York and Buffalo, the Colony is best reached over the Lackawanna Railroad to Mt. Morris, thence by conveyance or train four and one-half miles to the Colony. From Rochester over the Pennsylvania and Erie railroads. From Olean over the Pennsylvania railroad. The Pennsylvania and Erie railroads have stations on the Colony premises.

Adams Express, Western Union and Postal Telegraph Offices, Long distant Bell and Independent Telephones on the premises.

Visitors to patients are admitted Wednesdays and Saturdays from 10 to 11:30 A. M. and 2 to 4 P. M. Sick patients may be visited at any time the physician in charge of such patient gives permission to that effect.

Total acreage of grounds.....	1898.5 acres
Acreage under cultivation.....	625 acres

In case any patient becomes ill, the friends or relatives of such patient are notified as soon as is possible by telegram or letter. All inquiries about patients are promptly answered. The Colony cannot undertake to write voluntarily concerning a patient who is not ill. It writes only in answer to inquiries. Relatives and friends of patients should give prompt notice of any change in their address. This is requested in order that they may be reached without delay, if necessary.

Address all inquiries regarding patients to the Medical Superintendent. Give your full name and address and the patient's full name each time you write.



SAMPLE OF COLONY CORN IN 1915. THE FARMER
HOLDING STALK IS HIMSELF SIX FEET TALL

THE REQUIREMENTS FOR ELIGIBILITY FOR ADMISSION

To be admitted to the Craig Colony for Epileptics, the applicant must be a legal resident of New York State. All patients are admitted on the same basis as indigents. Once here, their financial standing is inquired into by the Colony's agent, and if it is found that the relatives of the patient or the patient can reimburse the State in whole or in part, they must do so.

Admissions are regulated in accordance with the law which provides that equal favor be shown every county in the State. The waiting list is always large. Epileptics of all ages are received. The Colony has as yet no proper facilities for caring for those epileptics who are insane or who are markedly delinquent therefore it is useless to consider filing applications for such types. The first step to secure a patient's admission is to consult the Superintendent of the Poor of the county, or the Commissioner of Charities of the city in which the applicant lives. This officer has the necessary application papers which must be filled out in every instance. Applicants who are mentally incompetent must be committed through a Court of Record. Applicants of normal mentality are received as voluntary patients.

No person suffering from epilepsy should enter Craig Colony as a matter of experiment. None should come here with a view of spending a few weeks or a few months only. Epilepsy is the most intractable of all disorders, and if a person suffering from it begins to show improvement under two or three years, he has every reason to feel encouraged.

Leaves of absence are always injurious to patients, and are systematically discouraged in every instance.

BOARD OF MANAGERS

FREDERICK PETERSON, M. D.	New York City
Mr. PERCY L. LANG	Waverly, N. Y.
Mr. DANIEL B. MURPHY	Rochester, N. Y.
Mr. BARNEY S. BEUERLEIN	Mt. Morris, N. Y.
MRS. LOUISE VAN RENNSELAER	Albany, N. Y.
CONSTANTINE F. MCGUIRE, M. D.	Brooklyn, N. Y.
Mr. WM. P. BIGGS	Trumansburg, N. Y.

OFFICERS OF THE BOARD

1915-1916

Mr. PERCY L. LANG	President
Mr. BARNEY S. BEUERLEIN	Secretary
Mr. JOHN F. CONNOR	Agent and Treasurer

COMMITTEE

1915-1916

Executive

Mr. DANIEL B. MURPHY, <i>Chairman</i>	
Mr. PERCY L. LANG	Mr. BARNEY S. BEUERLEIN
	Mr. WM. P. BIGGS

Auditing

Mr. DANIEL B. MURPHY, <i>Chairman</i>	
Mr. BARNEY S. BEUERLEIN	Mr. PERCY L. LANG

RESIDENT OFFICERS

WILLIAM T. SHANAHAN, M. D. Medical Superintendent
G. KIRBY COLLIER, M. D. First Assistant Physician
WILLIAM N. TRADER, M. D. Second Assistant Physician
JAMES F. MUNSON, M. D. Pathologist
ARTHUR L. SHAW, M. D. Third Assistant Physician
E. MABEL THOMSON, M. D. Woman Physician
ELIAS FISCHBEIN, M. D. Junior Assistant Physician
GLENN J. DOOLITTLE, M. D. Junior Assistant Physician
JAMES E. HAGGERTY, M. D. Junior Assistant Physician
JAMES H. VAN BUREN, M. D. Junior Assistant Physician
TRUMAN L. STONE. Steward
Mrs. R. E. DORAN, R. N. Superintendent of Nurses
Mrs. H. MANSFIELD, R. N. Assistant Superintendent of Nurses
Miss IDA E. WRIGHT, R. N. Matron
W. H. BEACH, D. D. S. Dentist

Resident Chaplains

Rev. WALTER B. McCARTHY. Roman Catholic
Rev. J. R. JEFFREY. Protestant

Visiting

Rev. Dr. A. BLUM, New York. Jewish Chaplain
A. G. BENNETT, M. D., Buffalo. Ophthalmologist
CLAYTON M. BROWN, M. D., Buffalo, Rhinologist, Otologist and Laryngologist
WILLIAM B. JONES, M. D., Rochester. Consulting Surgeon
LEE W. WHITNEY, M. D., Rochester. Orthopedic Surgeon
EDWARD A. SHARP, M. D., Buffalo. Neurologist
EDWARD L. HANES, M. D., Rochester. Neurologist

Administrative Assistants

WILLIAM C. COOPER. Bookkeeper
FRED W. HITCHCOCK. Bookkeeper
HARRY R. PORTER. Storekeeper
MISS FRANCES CALLAHAN. Stenographer
Miss MARY CASTLE. Stenographer

Miss JEANIE KLECKLER.....	Stenographer
C. M. SEIFERT, Ph. G.....	Druggist
Miss Marietta Hitchcock.....	Head Teacher
Mrs. J. METZGER.....	Teacher
Miss E. L. LONGCOR.....	Teacher
Miss J. E. WHALEY.....	Sloyd Instructor
MISS MARY E. NELSON.....	Teacher Arts and Crafts

In Care of Patients

Miss CATHERINE MURPHY, R. N.,	Chief Nurse, Peterson Hospital
Miss MARY CRELLEY, R. N.....	Supervisor, Villa Flora
Miss Mabel Edwards, R. N.,	Supervisor (Night), Peterson Hospital
Mrs. LENA R. CROCKER, R. N..	Supervisor, Schuyler Infirmary
Miss JENNIE McCARTHY.....	Supervisor, Villa Flora
F. H. CROFOOT.....	Supervisor, West Group
E. D. RICHMOND.....	Supervisor, East Group
FRANCIS McCONNELL	Supervisor, Village Green
EDWARD HALLY.....	Supervisor, Loomis Infirmary

Heads of Departments

EDWARD M. LOGAN.....	Chief Engineer
ARTHUR J. PORTER.....	Assistant Engineer
JOHN BEGGS	Plumber
CLARENCE J. MCNAUGHTON.....	Carpenter
LEWIS G. LOCKWOOD.....	Painter
J. FRED REBBAN	Head Laundryman
L. M. BRAY	Dairyman
JOHN COCKLE	Farmer
WILLIAM CAMERON	Gardenet and Florist
A. FRASER	Mason
MICHAEL HORN	Blacksmith
R. J. GILLETTE	Baker
ROBERT WATTS	Tailor
JAMES MANNIX	Brickmaker
C. J. O'CONNOR	Shoemaker
HOMER JUDD	Butcher
GEORGE DUFFY	Mattressmaker
HARRY McGRAW	Bandmaster



SMALL COTTAGE OCCUPIED BY EIGHT MARRIED ATTENDANTS. LOOMIS INFIRMARY AT LEFT.

REPORT

To the Legislature of the State of New York:

We, the Board of Managers of Craig Colony for Epileptics, have the honor to present herewith the Twenty-second Annual Report of the Board for the year ending September 30, 1915.

Changes in Membership

Dr. George E. Gorham of Albany, N. Y., resigned as a member of the Board of Managers January 12, 1915, and Governor Charles S. Whitman appointed William P. Biggs of Trumansburg, N. Y., to succeed him. By reason of failing health, Dr. Gorham was prompted to resign his office, in view of which, the following resolution was spread upon the minutes at the January meeting of the Board.

“Whereas, The health of Dr. George E. Gorham will not permit him to continue his services as a member of the Board of Managers of Craig Colony, be it

“Resolved, That in his withdrawal from the Colony, the Board loses one of its most valuable and devoted members, the State of New York one of its highest professional counselors, the unfortunate wards committed to our care one of the tenderest sympathizers and protectors, and we, his associates in the work to which he has contributed so generously and unselfishly, deeply deplore the conditions that remove him from his activities with us, and, be it further

“Resolved, That we bespeak for him a speedy and complete restoration to health, and a future, in which, much of joy and comfort shall be vouchsafed him.”

We record with profound emotion the death of Honorable James H. Loomis who for years was a member of our Board of Managers. His services to the State and Craig Colony are beyond estimate and command our highest admiration. His fulness of years, his broad experience, his deep seated honesty of thought

and purpose, his full minded manhood, brought to the Colony, a wise counselor, a fearless champion of right, and a delightful associate.

Pensions for Officers and Employees

The Board of Managers once more goes on record as being in favor of a retirement fund for all persons in charitable institutions, as also for similar compensation in all State institutions for like service.

Capacity and Census

On September 30, 1914, the census was males 752, and females 669, total 1,421. There were admitted during the year 153 males, 88 females, total 241. There were discharged during the year 108 males and 77 females, a total of 185, making the census on September 30, 1915, 797 males, 680 females, total 1,477.

The Colony has now exceeded its present capacity, and that we may properly house and care for even our present demands, we are in sore need of appropriations for new dormitories and better accommodations for employees who serve in the direct care of patients.

Appropriations Required

The Board of Managers most urgently requests the careful consideration of the following resolution passed at a regular meeting of said board held at the Colony on September 14, 1915.

“Whereas, The Colony in order to accomplish the purposes for which it was established has thus far failed to receive sufficient appropriations required to carry it toward completion there are at the present time needed the following items:

Item 1

Two one-story dormitories, accommodating at least sixty male patients each, to provide space in place of that in Letchworth House, a great fire hazard.
Similar request made in 1913 and 1914. \$80,000

In reference to this item there was passed May 25, 1915, the following resolution:

“Whereas, The Board of Managers of Craig Colony in its Twentieth and Twenty-first An-



WATER SOFTENING PLANT INSTALLED DURING 1914-15. CAPACITY INSUFFICIENT FOR COLONY NEEDS

nual Reports and by resolution August 12, 1913 and January 12, 1915 has condemned the Letchworth House, an old four-story non-fire-proof dormitory building, as unfit to properly house the patients of the Colony, and declared it to be a menace to human life, by reason of its construction and condition, and have several times urgently requested the respective State Departments at Albany to take proper cognizance of the extreme necessity of relieving the situation described, and

“Whereas, We as a Board and as individuals have waited on the State officers, representatives and departments in Albany, urging them to relieve the State from an impending catastrophe that the above recited conditions invite,

“Resolved, That we note with amazement and abhorrence the apparent indifference to the preservation of human life, reflected in the negative actions and attitude on the part of those, who alone are in position to remove this incubus, and we reiterate our appeal for prompt and immediate relief and call upon the people of the State to remove any responsibility from the Board of Managers of Craig Colony and place it on those who are responsible for the conditions, from which we have prayed deliverance many times.”

Item 2.

For building small dam at Kishaqua Creek Intake, for duplicate steam pump and extending pump room, for necessary changes in water mains, for moving clear well pump to power house, for main to and from Willow Pond, which would be deepened, thus adding materially to its capacity, etc. All for completing plan to pump entire supply

from Kishaqua Creek, thus abandoning dual system. All creek water to be filtered and softened..

25,000

This plan should be developed provided one more advantageous is not suggested by the State Department of Health. This matter has already been looked into to a considerable extent by the Health Department, who in a recent communication made the following comment: "In respect to utilizing Kishaqua Creek as the single source of raw water, it would seem possible, in view of existing topographic conditions, to provide a proper intake by constructing a low submerged dam just above the bridge crossing the creek near the filter plant.

Item 3

Cold storage and addition to Colony store..... 35,000

This was first requested in 1901, repeated in 1909, 1910 and 1911. The cold storage plant for which money was received in the year 1912 could not be constructed within the life of the appropriation for reasons, over which the Colony had no control. Appropriation also requested in 1914.

Item 4

Fire escapes, fire proof stairways, etc..... 12,000

Similar request made in whole or in part annually beginning 1909.

Item 5

Nurses and Attendants Home for Villa Flora Group. 35,000

(This would increase the capacity for female patients by seventy, as space now occupied would be vacated.) Similar request made in 1908, 1910, 1911, 1912, 1913 and 1914.

Item 6

Repairs and equipment	29,600
---------------------------------	--------

- (a) Larger telephone cable to Villa Flora Group (\$500).

The present cable is insufficient in capacity for the service required of it. Similar request made annually beginning 1910.

- (b) Remodeling old store now occupied by farm hands (\$2,000).

The employees' rooms now in this building have long been in such condition that radical repairs have been urgent, but funds have not been available. This building is an old Shaker structure erected many years ago. Similar request made annually beginning 1911.

- (c) To install certain machinery at the brick-yard so as to enable us to make shale brick and our own tile. Similar request made annually beginning 1911, but the amount asked for was not given, therefore this request is repeated (\$1,000).

- (d) Medical books, surgical instruments, equipment for medical and research work (\$1,000).

For some years past there has not been available funds for the medical equipment necessary, that the patients at the Colony may be properly examined and treated along special lines.

- (e) Additional plumbing in various buildings and replacing some improperly located (\$3,000).
- (f) For additional furnishing in the various cottages (\$4,000).

This amount was asked for in the last two years but was not granted, and in consequence no money has been available to properly furnish various structures about the institution. If funds are received for the erection of an employees' home in the Women's Group, a considerable portion of the amount in this item would be needed to furnish that structure.

(g) For placing wooden benches on porches of various cottages occupied by patients (\$300).

Under the present arrangement of patients carrying chairs from the interior of the cottage and back results in the breaking of many chairs. Similar request made in 1912, 1913 and 1914.

(h) Permanent seats for Athletic Field (\$300).

It is now necessary to carry chairs, settees, etc., several hundred feet to the athletic field and back and this results in the breaking of many of them. Similar request made in 1912 and 1913.

(i) Fire hydrants near West House Barn, Greenhouse, east of Dairy Barn, etc.

2,500

(j) Brass cylinder metal case washers, motor driven to replace old washers that are worn out and motors to drive all machinery in lower floor of laundry, not at present motor driven. This replacement of equipment is urgently required

8,500

(k) Extraordinary repairs, including sheds at Walrath barnyard damaged by fire in 1913, raising shed, dairy barn and erecting shed at West barn, etc.

5,000

(l) Milking machine

1,500

Such difficulty exists in securing patients able to milk and for sanitary reasons, equipment of this kind is of the utmost importance.

Item 7

West Wing to Peterson Hospital, thus completing this structure and providing very much needed increase in Hospital accommodations.....

45,000

Similar request made in 1904, 1909, 1910, 1911, 1912, 1913 and 1914.

Item 8

House for First Assistant Physician who is Assistant Superintendent 6,000

(To vacate space in Hospital required for patients.) Similar requests made in 1909, 1910, 1911, 1912, 1913 and 1914.

Item 9

For installing motors on thirty sewing machines in tailor shop and sewing room; for electric cutter for tailor shop and sewing room; for meat grinder; for eight potato and vegetable peelers, for motor for printing office, transformers, etc. 3,500

Item 10

Placing all telephone and electric transmission wires in conduits; placing 25 lights about the grounds for much needed illumination; line transformers and installation of electric lights in the three employees' cottages near standpipe and the farmer's and butcher's cottage 35,000

Item 11

Motor truck, three-ton capacity. 4,000

This truck would take the place during the summer time of several teams thus enabling the Colony to use these teams to excellent advantage on the farm, and for grading and similar work about the Colony. During the winter time when it might be impossible to use the truck these teams would be available for distribution of various supplies. Similar request made annually beginning 1910.

Item 12

A reception and observation Cottage for all incoming patients 40,000

Similar request made annually beginning in 1906.

Item 13

South Farmstead Group (for dormitory, barn, shed, silo, etc.) Request made in part in 1908 and similar request to present in 1912, 1913 and 1914. 30,000

Item 14

Steel coal trestle with storage pockets, conveyors, etc. 15,000
 (Old trestle was condemned and out of use for over three years, it finally becoming necessary because of its dangerous condition to tear it down in 1915.) Similar request made annually beginning 1909.

Item 15

Roads, walks, grading and planting..... 5,000

Item 16

Drain tile for Farm, labor for placing the same and purchase of ditching machine..... 2,000
 Similar request made in 1915. At least \$1,000 should be appropriated annually for this purpose or funds should provide for sufficient machinery in the Colony brickyard so as to enable the Colony to manufacture its own agricultural drain tile.

Item 17

Two cottages, one for males and the other for females, who are temporarily mentally confused..... 40,000
 Similar request made annually beginning 1909.

Item 18

Protestant Chapel 30,000
 Similar request made in 1900, 1904, and annually beginning 1906.

Item 19

Addition to Laboratory 10,000
 Similar request made annually beginning 1904.

Item 20

Industrial Building, north of laundry.....	40,000
Similar request made in 1912, 1913 and 1914.	

Item 21

General Assembly Hall	50,000
Similar request made in 1910, 1911, 1912, 1913 and 1914. (Colony population is 1750. Present old hall accommodates 350.)	

Item 22

To provide for central heating plant, at least.....	80,000
(This would permit of great saving in heating.) Similar request made in 1903, 1904, 1905, 1908, 1909, 1910, 1911, 1912, 1913 and 1914.	

Item 23

Placing a basement under two wings of the Trades School to provide much needed storage space.....	3,000
---	-------

Item 24

West House Farm Dormitory	25,000
(Foundation of old Six Nations could be utilized.)	

Item 25

For applying cement stucco to all buildings at present whitewashed, thus affording a permanent exterior finish	16,500
--	--------

Item 26

A concrete retaining wall at the power plant in place of present wood piling	20,000
--	--------

Owing to the building of the water softening plant on the bank of Kishaqua Creek, immediately south of the Colony highway and building of the new power plant and stack north of the same at a point closer to the creek channel than the old boiler house and stack, the erection of such wall for protection is urgently needed.

Item 27

Piling to protect farm land along the east side of Kishaqua Creek north of Dansville and Mt. Morris Railroad 1,000

Item 28

Extending main horse barn; rebuilding shed adjacent thereto, so as to arrange for an additional root cellar and placing new floor, stalls, etc., in present structure 6,500

Item 29

Replacing light service pipe with cast iron water pipe and for connecting all faucets with spring water system 4,500

Item 30

East Wing to Central School Building. 20,000

The present structure is too small to provide space for all school work. Similar request made in 1913 and 1914.

Item 31

Nurses' and Employees' Home, Men's Group. 25,000

(Those employees on duty in the Letchworth Group, part of those at Loomis Infirmary, Hospital, etc., are without proper accommodations at present.) Similar request made in 1909, 1910, 1911, 1912, 1913 and 1914. This must be deferred until after new dormitories are erected to replace Letchworth House.

Item 32

Blacksmith Shop 3,000

\$776,600

Item 33

Maintenance for the fiscal year 1916-1917. 345,000

\$1,121,600

But inasmuch as the erection or installation of all of these items, could not under existing conditions be taken care of within the period covered by appropriations, a request is herewith respectfully made to the Governor and the Legislature to grant and the various State Departments having supervision to assist in obtaining the following imperatively needed of the above mentioned items:

1. Dormitory to replace Letchworth house.....	\$80,000 00
2. For providing the Colony an ample and sanitary supply of water as outlined in Item 2, in the foregoing part of this resolution, at least.....	25,000 00
3. Cold storage building	35,000 00
4. Fire escapes, etc	12,000 00
5. Nurses' and Attendants' Home, Villa Flora Group	35,000 00
6. Repairs and equipment	29,600 00
	<hr/>
	\$216,600 00
	<hr/>

and be it further

Resolved, That for the fiscal year beginning October 1, 1916, the Colony at its present capacity, will require for maintenance at least \$345,000 of which, if such a subdivision is continued \$142,000 should be designated for salaries and wages.

Respectfully submitted,

PERCY L. LANG,
DANIEL B. MURPHY,
FREDERICK PETERSON,
W. P. BIGGS,
BARNEY S. BEUERLEIN,
LOUISA VAN RENSSELAER.

SONYEA, N. Y., October 13, 1915.

TREASURER'S ANNUAL REPORT

To the Board of Managers of Craig Colony for Epileptics:

The Treasurer of Craig Colony for Epileptics respectfully submits the following annual report for the year ending September 30, 1915:

General Fund — Maintenance

1914.	<i>Receipts</i>
Oct. 1. Balance in treasurer's hands.....	\$4,012 94
From Comptroller, chap. 529, Laws 1914	299,725 00
From Comptroller, chap. 792, Laws 1913	1,500 00
From Comptroller, chap. 726, Laws 1915	25,500 00
From reimbursing patients.....	7,891 24
From clothing	19,462 02
From miscellaneous earnings.....	6,349 88
From refunds	105 73
	<hr/>
	\$364,546 81

Disbursements

Disbursements, less re-funds	\$322,657 74
<hr/>	

Disbursements, including refunds	\$322,763 47
To State Treasurer as per sec. 37, chap. 580, Laws 1899	33,703 14
Balance in treasurer's hands	8,080 20
	<hr/>
	\$364,546 81
<hr/>	

Repairs and Equipment

Chap. 791, Laws 1913.

1914.

Oct. 1. Balance Comptroller's hands.....	\$9 02
Lapsed	\$9 02

Brick School

Chap. 791, Laws 1913.

1914.

Oct. 1. Balance Comptroller's hands.....	\$14 38
Lapsed	\$14 38

Improving Water Supply "FF"

Chap. 521, Laws 1914.

1914.

Oct. 1. Balance Comptroller's hands.....	\$12,514 20
Received from Comptroller	
and disbursed	\$9,372 13
Reappropriated by chap. 728,	
Laws 1915	3,142 07

	12,514 20

Improving Water Supply "E"

Reappropriated from Chap. 521, Laws 1914, by Chap. 728, Laws 1915.

1914.

Oct. 1. Balance reappropriated	\$3,142 07
Balance Comptroller's hands	\$3,142 07

New Barn

Chap. 521, Laws 1914.

1914.

Oct. 1. Balance Comptroller's hands.....	\$4,151 59
Received from Comptroller	
and disbursed	\$3,751 75
Balance Comptroller's hands	399 84

	4,151 59

Additional Plumbing

Chap. 730, Laws 1913.

1914.

Oct. 1. Balance Comptroller's hands.....	\$175 23
Received from Comptroller	
and disbursed	\$3 89
Lapsed	171 34

	175 23

Extraordinary Repairs

Chap. 730, Laws 1913.

1914.

Oct. 1. Balance Comptroller's hands.....	\$51 73
Lapsed	\$51 73

	51 73

Improving Water Supply "A"

Chap. 790, Laws 1913.

1914.

Oct. 1. Balance Comptroller's hands.....	\$20,101 35
Received from Comptroller	
and disbursed	\$17,641 57
Reappropriated by chap. 728, Laws 1915	2,459 78

	20,101 35

Improving Water Supply "C"

Reappropriated from Chap. 790, Laws 1913 by Chap. 728, Laws 1915.

1914.

Oct. 1. Balance reappropriated	\$2,459 78
Received from Comptroller	
and disbursed	\$407 63
Balance Comptroller's hands	2,052 15

	2,459 78

Four Cottages "H"

Chap. 791, Laws 1913.

1914.

Oct. 1. Balance Comptroller's hands.....	\$1,549 33
Received from Comptroller	
and disbursed	\$237 44
Reappropriated by chap. 728,	
Laws 1915	1,311 89

	1,549 33

Four Cottages "B"

Reappropriated from Chap. 791, Laws 1913 by Chap. 728, Laws 1915.

1914.

Oct. 1. Balance reappropriated	\$1,311 89
Received from Comptroller	
and disbursed	\$750 39
Balance Comptroller's hands	561 50

	1,311 89

Central Power and Heating Plant "B"

Chap. 790, Laws 1913.

1914.

Oct. 1. Balance Comptroller's hands.....	\$39,843 17
Received from Comptroller	
and disbursed	\$23,856 87
Reappropriated by chap. 728,	
Laws 1915	15,986 30

	39,843 17

Central Power and Heating Plant "D"

Reappropriated from Chap. 790, Laws 1913 by Chap. 728, Laws 1915.

1914.

Oct. 1. Balance reappropriated	\$15,986 30
Received from Comptroller	
and disbursed	\$10,106 89
Balance Comptroller's hands	5,879 41

	15,986 30

Enlarging Underground Crossing BB-1

Chap. 521, Laws 1914.

1914.

Oct. 1. Balance Comptroller's hands.....	\$2,595 19
Received from Comptroller	
and disbursed	\$2,595 19

	2,595 19
	=====

Sun Room Cottages

Chap. 521, Laws 1914.

1914.

Oct. 1. Balance Comptroller's hands.....	\$147 52
Received from Comptroller	
and disbursed	\$140 67
Balance Comptroller's hands	6 85

	147 52
	=====

Extension and Repairs to Dairy Barn

Chap. 531, Laws 1914.

1914.

Oct. 1. Balance Comptroller's hands.....	\$1,638 65
Received from Comptroller	
and disbursed	\$1,578 17
Balance Comptroller's hands	60 48

	1,638 65
	=====

Employees' Cottages and Outside Connections "BB"

Chap. 531, Laws 1914.

1914.

Oct. 1. Balance Comptroller's hands.....	\$3,493 02
Received from Comptroller	
and disbursed	\$2,506 88
Balance Comptroller's hands	986 14

	3,493 02
	=====

Employees' Cottages and Connections "A"

Chap. 727, Laws 1915.

1914.

Oct. 1. Appropriation	\$3,300 00
Received from Comptroller	
and disbursed	786 46
Balance Comptroller's hands	2,513 54
	3,300 00

Restoring Laundry Building and Replacing Equipment "A"

Chap. 531, Laws 1914.

1914.

Oct. 1. Appropriation	\$15,000 00
Received from Comptroller	
and disbursed	\$7,367 45
Balance Comptroller's hands	7,632 55
	15,000 00

All of which is respectfully submitted,

JOHN F. CONNOR,
Treasurer Craig Colony for Epileptics.

We hereby certify that we have examined the foregoing Treasurer's Report for the year ending September 30, 1915, having compared the same with the Treasurer's books and vouchers and with the Superintendent's books and report, and we believe the same to be correct.

DANIEL B. MURPHY,
BARNEY S. BEUERLEIN,
Auditing Committee.

REPORT OF THE MEDICAL SUPERINTENDENT

SONYEA, N. Y., October 12, 1915.

To the Board of Managers of Craig Colony for Epileptics:

The Annual Report of the Medical Superintendent for the fiscal year ending September 30, 1915, being my seventh report, is submitted herewith:

Capacity

The capacity of the institution remains unchanged as no additional dormitory space was provided during the year. As annually for years past, I desire to call attention to the lack of the structures required to permit of the proper classification of patients and the furnishing of living accommodations with privacy for nurses and attendants who are in the direct charge of patients. Without these cottages it is impossible to satisfactorily carry on the work of the Colony as regards the care of inmates and the securing of the highest type of nurses, attendants, etc. It is difficult enough with the best facilities to secure a conscientious nursing force to care for the inmates of our various public institutions.

Accommodations at the Colony for the more defective types of epileptics are entirely inadequate, therefore, as these will continue to apply for admission there should be erected simple, well arranged, one-story brick structures, with ample dormitory and sitting room accommodations, large clothes rooms, proper veranda space and adequate toilet and bathing facilities. The present infirmaries at the Colony are not at all suited for the purpose for which they are now used, but might with few changes be readily utilized as dormitories for patients of the type now at the Letchworth House, Eglantine, Gentian, Primrose and Saxifrage Cottages. In the present infirmary feeble patients must go down one and two flights of stairs to each meal. All ages as well as those of various mentalities are in the one structure, thus making proper care, based on classification, exceedingly difficult.

The Village Green Group for males should be at once enlarged by erecting at least two additional dormitories, one of these being designated for the boys and the other for adult males of higher mentality. The Letchworth House should be abandoned for patients, remodeled and utilized as an Employees' Home in the division for male patients. To provide for the patients now at the Letchworth House, the present Loomis Infirmary might be vacated if new one-story pavilions of adequate capacity were erected in the West Group for Infirmary type of males. **THE FIRE HAZARD AT THE LETCHWORTH HOUSE IS TOO GREAT TO CONTINUE UNABATED.** In the same West Group might be built another cottage with a dining room and kitchen on the first floor, of adequate size to accommodate all in the completed group. Employees' quarters should be located on the second floor similar to those now in Wyandotte Cottage. Wyandotte Cottage could be easily remodeled for use as a dormitory building for patients of a type to work on the portion of the Colony farm located in that vicinity.

If the Colony had in years past received annually adequate appropriations for construction so as to carry it towards completion as originally planned, there would not now present the necessity for requesting such a large sum for the erection of buildings. In arriving at the final scope of development of an institution a reasonable allowance must necessarily be made for such modifications, from time to time, of the general plan as experience dictates.

Proper classification of patients according to sex, age, mentality, physical condition, occupation, etc., cannot be attained without a bed capacity sufficiently large to permit of elasticity in the matter of making transfers of patients from one cottage to another as change in their physical or mental condition may indicate. Cottages of small capacity are not only required for the reasons just mentioned, but are conducive to better discipline. Nine-tenths of the difficulties encountered in the care of the patients at Sonyea occur in the large dormitory buildings.

In a recent report of the State Commission to investigate provision for the mentally deficient, the statement is made that the Craig Colony for Epileptics has almost reached the reasonable

limit of its ultimate capacity, 1,500 patients. I regret that this definite number has been mentioned by this Commission, as in my opinion, it should be at least 1,800 inmates. If the Colony was allowed certain buildings long needed, frequently requested and being without which handicaps it, the Colony's capacity would approximate 1,800 beds. These buildings are the following:

Erection of West Wing, thus completing Peterson Hospital.

Reception and Observation Cottages.

Nurses' and Attendants' Home, Villa Flora Group.

Nurses' and Attendants' Home, Group for male patients.

Two cottages for mentally confused patients.

Dormitory for South Farmstead Group.

Dormitory Building on foundation of Old Six Nations Dormitory.

Sufficient number of Cottages for Children, etc.

It is difficult at best to carry on the work of an institution for defectives, therefore, the erection of proper buildings for classification and the providing adequate equipment for the same are of fundamental importance. If material increase in capacity is sought there would be required in addition to the items hereafter enumerated an increase in proper proportion of additional tillable land, farm buildings and equipment, with necessary furnishing for patients, accommodations for necessary employees, etc.

I have compiled the following list of items at present needed in order to place the Colony in a position to satisfactorily carry on the work for which it was established. As has been so many times mentioned, the total amount involved is large, as the result of the majority of these items being deferred from year to year, instead of having a reasonable amount appropriated annually so as to permit of a progressive development of the Colony toward completion.

If the amount required for maintenance for the fiscal year 1916-17 is to be subdivided, there will be required for Salaries and Wages at least \$142,000, the total amount for all maintenance for that period to be \$345,000. If the inmate population should be materially increased before or during that period, there will be needed a proportionate additional amount for their maintenance.

Appropriations Required*Item 1*

Two new one-story Dormitories accommodating at least 60 male patients each to provide space for the patients now residing in the condemned Letchworth House \$80,000 00

As mentioned in several of my previous reports the Letchworth House, an old four-story Shaker structure erected in 1858, is entirely unsuited for use as a dormitory for defectives, who are not only mentally, but in many instances also physically much impaired and in addition subject to epileptic seizures, which states would make it exceedingly difficult, if not impossible, to remove to a place of safety all of the patients, in case fire occurred in that structure. As mentioned under Item 32, this building might be remodeled and made into a satisfactory employees' home for the Group for males, at a comparatively small cost. It is suggested that these two new dormitories, while simple, be substantial in construction and that if two stories in height that inclined planes be considered for use instead of stairs, unless the latter have frequent landings, low risers, broad treads and are fireproof. Far better would be one-story pavilions with abundant facilities for ventilation, with adequate porch room and sufficient, easily accessible toilet fixtures, at least one bowl and one water closet for each six patients, required by the type of patients now in the Loomis Infirmary and Pryor Pavilion, who are the most deficient grade, and require in consequence close and constant supervision. Plain interior brick walls,

without plaster but painted, are economical and sanitary. All toilet and bath rooms should have tile, laid on reinforced concrete floors, if above first floor, without partitions between individual fixtures and should have tile wainscoting at least five feet in height. Partitions in toilet rooms prevent supervision and invite injury to the epileptic. The present Loomis Infirmary is not at all suited for the care of the various classes of patients who must at present necessarily reside therein, but would satisfactorily provide dormitory space for those patients now at the Letchworth House. The Schuyler Infirmary should some day be used for female patients of a lower mental grade who now reside in Primrose, Saxifrage, Eglantine and Gentian Cottages, thus removing them from such close proximity to female patients of higher mentality residing in the other cottages in the Villa Flora Group. If the Schuyler Infirmary could be used in this manner the guards at present on the windows could be removed, thus lessening materially the risk of loss of life if a fire should occur. The most deficient types now residing in that Infirmary should be placed in specially arranged one-story pavilions erected on the plateau a short distance to the south of the Villa Flora Group. If the Colony is to be expected to care for a certain difficult class of female patients without control of certain instincts there must be provided a special structure for that purpose, permitting of close supervision, to be located near, but not in the present Villa Flora Group. Similar request made in 1913 and 1914.

Item 2

Nurses and attendants' home for Villa Flora,
Women's Group \$35,000 00

For several years past it has been necessary to house employees in this group in three dormitories erected for the use of female patients. If a nurses' and attendants' home was available there would be beds freed for the use of seventy (70) additional female patients. The buildings at present used are not properly arranged for the use of employees, being divided mostly into wards and not single rooms. If careful and proper consideration is given to the hours of duty and the work required of nurses and attendants at the colony, especially in the infirmaries, it becomes apparent at once that a good single room separate and distinct from patients' cottages should be available for such employees, when they are relieved, each day, from duty. Similar request made in 1908, 1910, 1911, 1912, 1913 and 1914.

Item 3

Cold storage and addition to colony store. \$35,000

For reasons over which the colony had no control, work on the cold storage plant could not be begun within the life of the appropriation made in 1912. Unfortunately this item when presented for reappropriation in 1914 was vetoed by the then Governor. The necessity for having at the colony proper cold storage facilities is so apparent to anyone looking into the matter, that it would seem that there should be no question regarding the securing of funds for erecting such a structure of adequate size. The pres-

ent cold storage space in which must be kept beef, pork, butter, lard, eggs, fish, salt fish and salt meats, etc., for a population of nearly 1,800 individuals consists of but one room thirteen feet long, twelve feet wide and eight feet high, the refrigeration for which is supplied by natural ice. At present it is impossible to keep any food supplies requiring cold storage without material loss or deterioration. The sum requested is based upon plans and specifications prepared by the State architect. This was first requested in 1901, repeated in 1909, 1910 and 1911.

Item 4

Repairs and equipment.....	29,600
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(a) Larger telephone cable, Villa Flora group (\$500).

As noted for six years past, the present cable is insufficient in capacity for the service required of it.

(b) Remodeling old store occupied by farm hands (\$2,000).

The employees rooms now in this building have long been in such condition that radical repairs have been urgent, but funds have not been available. This building is an old Shaker structure, erected many years ago. Similar request made annually beginning 1911.

(c) To install certain machinery at the brick yard so as to enable us to make shale brick and our own drain tile. This amount asked for last year was not given, therefore, this request is repeated (\$1,000).

Similar request made annually beginning 1911.

(d) Medical books, surgical instruments, equipment for medical and research work (\$1,000).

For some years past there has not been available funds for the medical equipment necessary that the patients at the colony may be properly examined and treated along special lines.

(e) Additional plumbing in various buildings and replacing some improperly located (\$3,000).

(f) For additional furnishings in the various cottages (\$4,000).

This amount was asked for in the last two years, but was not granted, and in consequence no money has been available to properly furnish various structures about the institution. If funds are received for the erection of an employees' home in the women's group, a considerable portion of the amount in this item would be needed to furnish that structure.

(g) For placing wooden benches on porches of various cottages occupied by patients (\$3,000).

The present arrangement of patients carrying chairs from the interior of the cottage and back results in the breaking of many chairs. Similar request made in 1912, 1913 and 1914.

(h) Permanent seats for athletic field. It is now necessary to carry chairs, settees, etc., several hundred feet to the athletic field and back, and this results in the breaking of many of them (\$300).

(i) Fire hydrants near west house barn, green house, east of dairy barn, etc. (\$2,500).

(j) Brass cylinder metal case washers, motor driven to replace old washers that are worn out and motors to drive all machinery in lower floor of laundry not at present motor driven. This replacement of equipment is urgently required (\$8,500).

(k) Extraordinary repairs, including sheds at Walrath barnyard damaged by fire in 1913, raising shed, dairy barn and erecting sheds and silo at west barn, etc. (\$5,000).

(l) Milking machine (\$1,500).

Such difficulty exists in securing patients able to milk and for sanitary reasons, equipment of this kind is of the utmost importance.

Item 5

West Wing of Peterson Hospital..... \$45,000 00

To complete this important structure and to permit: (a) making certain improvements in the operating room and rooms connected therewith, i. e., instrument room, sterilizing room, etc., (b) relocating the hydrotherapy apparatus so as to permit of its being used to more advantage by both sexes, this mode of treatment being of great value to many epileptics; (c) installation of a special diet kitchen, something much needed; (d) erecting on the rear of the entire completed hospital a two-story iron veranda of ample width for the fresh air treatment of patients residing in the hospital; such porches would also be very useful as sun rooms during the day, to be open in summer and enclosed with glass and heated during the cold months. Iron stairways in connection with



BARN BURNED IN AUGUST, 1913. FUNDS NOT AS YET AVAILABLE FOR REPAIRS.

these porches would serve as fire escapes; (e) installing an elevator for the removal of sick patients from one floor of the hospital to another and to receive them from the ambulance; (f) providing enlarged space for the pharmacy; (g) installing proper facilities for X-ray work. All being urgently needed to properly carry on the work of the Institution. The pupil nurses of the Colony Training School must perform receive much of their training in this building.

As frequently mentioned in earlier reports, the hospital as it stands at present is entirely inadequate to provide proper accommodations for the approximately 10 per cent of the present population of the Colony requiring hospital care. In other words, the growth of the Hospital has not kept pace with the growth of the Institution. This item in conjunction with Item 6, would if granted permit of there being made available at least 50 more beds for female patients and employees requiring Hospital care.....

(Similar request made in 1904, 1909, 1910, 1911, 1912, 1913 and 1914.)

Item 6

House for first assistant physician, who is the assistant superintendent, so as to vacate space now occupied by his quarters in Peterson Hospital. This would permit an increase of 15 beds, for female patients requiring hospital care and attention, in the capacity of the building. This plan is much more economical than to erect a separate cottage for this number of patients....

6,000 00

(Similar request made in 1909, 1910, 1911, 1912, 1913 and 1914.)

Item 7

For building small dam at Kishaqua intake, for duplicate steam pump and extending pump room, for necessary changes in water mains, for moving clear well pump to power house, for main to and from Willow pond, which would be deepened thus adding materially to its capacity, etc. All for completing plan to pump entire supply from Kishaqua creek, thus abandoning dual system. All creek water to be filtered and softened.....

25,000 00

This plan should be developed providing one more advantageous is not suggested by the State Department of Health. This matter has already been looked into to a considerable extent by the Health Department, who in a recent communication made the following comment: "In respect to utilizing Kishaqua creek as the single source of raw water, it would seem possible, in view of the existing topographic conditions, to provide a proper intake by constructing a low, submerged dam just above the bridge crossing the creek near the filter plant." To provide for an ample supply of sanitary water for all purposes at the Colony there will be required at least \$25,000. At the present time the creek water supply which affords fire protection is uncertain, owing to the arrangement of the intake, which after constant pumping quickly becomes clogged with gravel. In case of fire and such clogging of the intake pipe occurring, there would result at such a critical time a serious, if not total, shortage of water. By laying a line from the pond to the power house where the steam pumps are located, it would be possible to draw on the pond in case of such emergency. The arrangement above outlined would relieve a situation which at present is not sufficient to meet the Colony needs.

Item 8

Fire escapes, fireproof stairways, etc. \$12,000 00

For the erection of a fire escape on the rear of Spratling Hall, on the north and south end of the Letchworth House, if the building is to be retained. On each end of Peterson Hospital and on Chestnut Cottage. These buildings are all higher than two stories and at present have no fire escapes as required by law, except the Letchworth House, which has an insufficient number. This request has been made previously but not granted. All structures in institutions, especially for those who are mentally defective should have inside fireproof stairways as well as interior iron stairways of proper design. In the older parts of the Loomis and Schuyler Infirmaries, respectively, there are wooden stairways which afford the only means for patients to reach the first floor from the second floor. These stairways furthermore are dangerously located so as to invite serious injury to patients in case of a rush to escape from the building should there be a fire. If funds are made available, it would be an exceedingly simple matter to arrange for a fire wall to surround relocated iron stairways to replace those dangerous wooden stairs. In installing fire escapes for the Colony buildings careful consideration should be given those of the Kirker-Bender Type. Similar requests made in whole or in part annually beginning 1909.

Item 9

For installing motors on thirty sewing machines in tailor shop and sewing room; for electric cutter for tailor shop and sewing room; for meat

grinder; for eight potato and vegetable peelers; for motor for printing office, transformer, etc..

3,500 00

This equipment is desired so as to make available electric power where such is needed greatly. If power sewing machines were available in the tailor shop and an additional paid tailor employed the Colony could then manufacture all of the suits, overcoats, shirts, overalls, etc., used by male patients. This would be more satisfactory than purchasing suits made in the State prisons.

Item 10

Placing all telephone and electric transmission wires in conduits; placing 25 lights about the grounds for much needed illumination; line transformers and installation of electric lights in three employees' cottages near standpipe and the farmer's and butcher's cottage.....

35,000 00

The grounds are insufficiently illuminated at present to protect confused patients falling in seizures and make it safe for patients and employees necessarily going from building to building during hours of darkness. The present pole lines must be replaced as the majority are rotted at the base. It would seem economy to put all wires underground and thus obtain a much better service than is possible under existing circumstances. *The menace of having high voltage and telephone wires on the same poles must also be provided for*

Item 11

Motor truck, three ton capacity.....

4,000 00

This truck would take the place during the summer time of several teams, thus enab-

ing the Colony to use these teams to excellent advantage on the farm, and for grading and similar work about the Colony. During the winter time when it might be impossible to use the truck these teams would be available for distributing the various supplies. Similar request made annually beginning 1910.

Item 12

A reception and observation cottage for all incoming patients 40,000 00

This structure was included in the original plan of the Colony drawn some 19 years ago. It should have been one of the first structures built. It is self-evident that patients when admitted to the Colony should be received in a specially arranged structure, where they can be kept under close supervision and observation for a considerable period so that their symptoms may be carefully noted and the outline of their subsequent treatment arranged for. Furthermore, if such a building was available, all of the incoming patients would be kept from contact with patients in other parts of the Institution and the introduction of various contagious diseases would thus be minimized. This proposed structure should be located in the main administrative group and should contain adequate rooms for the examination of patients, ample clothes rooms, toilet and shower baths, a hydrotherapy outfit, kitchen and dining rooms, accommodations for nurses on special duty and living quarters for the assistant physician who would be placed in charge of the building. Similar request made annually beginning in 1908.

Item 13

South Farmstead Group (For dormitory, barn, shed, silo, etc.) \$30,000 00

In the summer of 1901, a frame house, which stood on the south farm was destroyed by fire. In 1902 the barn standing on the same Colony land was struck by lightning and as result burned. These structures have never been rebuilt. This part of the Colony's tillable land located such a long distance from the present sole farm group means that it cannot be cared for at present in the intensive way it could be if workers resided on the spot. There is in addition to the land at the site mentioned another large lot, containing 50 acres, located about one-half mile further south. Request made in part in 1908 and similar request to present in 1912, 1913 and 1914.

Item 14

Steel coal trestle with storage pockets, conveyors, etc 15,000 00

The Colony has for five years been without the use of a coal trestle, as the old wooden trestle, formerly used, was condemned as beyond repair and torn down. Funds for replacing it have not been made available. This state of affairs results in the Colony being greatly handicapped in the handling of the many thousands of tons of coal annually consumed. The new coal trestle and conveyor are essential so as to permit the Colony to store economically a year's supply of coal, if necessary, securing it at the lowest possible price obtainable. As mentioned in my last report, the old coal trestle which



CLEARED LAND IN FOREGROUND. KISHAQUA GORGE IN MID-BACKGROUND. COTTAGES FOR MALES IN BACKGROUND

was condemned some years ago had become so dangerous that I ordered it torn down. The Pennsylvania Railroad Company has since shifted the south end of the siding to the west so as to permit of the unloading of soft coal nearer the Power House than could be obtained from the old siding, after the razing of the trestle, such an arrangement being, however, but temporary in nature. It would seem that with the evident lack of facilities for unloading coal at the Colony, necessitating repeated handling of the same, enforcing patients and employees to work out of doors daily, even Sundays, in all kinds of inclement weather, that relief should be afforded the Colony in this urgent matter by the coming Legislature. Despite our best efforts we are obliged at times to pay demurrage on coal.

Item 15

Road, walks, grading and planting..... 5,000 00

There are many of the roads at the Colony still in need of attention so as to place them in a proper condition for the use required of them. More cement walks are required. A considerable amount of grading is to be done, of a kind which cannot be accomplished without hiring teams, it being impossible to spare the Colony teams from their regular work for any great length of time.

Item 16

Drain tile for farm, labor for placing the same and purchase of ditching machine..... 5,000 00

This amount is required so as to continue this very profitable work. No appropriation for

this purpose was obtained from the last two Legislatures. This title is especially needed in the South Farm, Midland Field, Grange Field, Villa Flora Field, North Field, etc. At least \$1,000 should be appropriated annually for this purpose and funds should provide for sufficient machinery in the Colony brick yard to enable the Colony to manufacture its own agricultural draining tile.

Item 17

Two cottages, one for males and the other for females, who are temporarily mentally confused.. 40,000 00

The Colony has during each year many patients who are temporarily unbalanced mentally, requiring during such periods close supervision and special treatment. The lack of facilities for providing humane and proper care of such patients has long been apparent but requests for relief of this situation have not met with the prompt response which they should have had. When the State assumes the care of epileptics it should provide proper facilities. The placing of patients, who are ordinarily of fair mentality in a building with patients of permanently much impaired mentality because the former have a transitory mental change seems to me not exactly humane. Simple, well ventilated, one story structures with brick interior walls, one for each sex, with proper equipment of hydrotherapeutic appliances, toilet rooms, special diet, kitchens, etc., would place the Colony in a position to provide the indicated care for such of its patients as might be in a state of acute mental unbalance. Similar request made annually beginning 1909.



CLEARED LAND EAST OF OTHER VIEW SHOWN. THIS WILL ULTIMATELY BE UNDERDRAINED AND TILLED.

Item 18

Protestant Chapel \$30,000 00

For eleven years past there has annually been made a request that an appropriation be granted for a Protestant Chapel, the old Shaker structure, the House of Elders, being entirely inadequate for the purposes for which it is used. In a neighboring institution an appropriation for this purpose was made some years ago.

Item 19

Addition to Laboratory 10,000 00

The present laboratory building should be doubled in size so as to provide proper accommodations for carrying on the work of this department and its need becomes more and more apparent as the years go on. The institution is handicapped very much in carrying on research activities and the necessary laboratory work of a routine nature.

Similar request made annually beginning 1904.

Item 20

Industrial building, to be erected north of present laundry 40,000 00

At the present time the facilities for carrying on the industrial work of the present Trades School building, in which the majority of the industrial work is carried on, are entirely too small. The new structure would provide space for the sewing room and tailor shop, now in separate structures, but which should, to obtain the best results, be in the same building; mattress shop; shoe shop; basket and chair caning shop, etc. This building should have a high, dry base-

ment to provide additional storage space. The space now occupied by the tailor shop could be used to very good advantage as quarters for farm and other employees, who would in addition be at hand at night to man the fire apparatus, which is located on the first floor of this structure. The space in the store building now occupied by these farm employees is very much needed for general storage purposes.

Similar request made in 1912, 1913 and 1914.

Item 21

General Assembly Hall	50,000 00
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The Colony finds it increasingly difficult to hold lectures, entertainments, dances, etc., for those living at the Colony, both patients and employees, owing to the fact that the only assembly hall available will accommodate less than one-fourth of the total population of the Institution. Entertainments must perforce be repeated three times at least to give all who so desire an opportunity to attend. In a community located in such a remote district as is the Colony, it is very essential that proper facilities be available for entertainment and recreation during the year, but in particular during the long winter months. The present assembly hall is a small wooden structure built by the Shakers over fifty years ago. It is poorly ventilated and entirely inadequate in every respect. It is hoped that careful consideration will be given to this need of the Institution and that soon an appropriation will be made available for such a structure.

Similar request made in 1910, 1911, 1912, 1913 and 1914.



POWER PLANT. FUNDS TO ENLARGE THIS STRUCTURE, FOR INSTALLATION OF A CENTRAL HEATING PLANT
SHOULD BE MADE AVAILABLE.

Item 22

To provide for Central Heating Plant, at least. 80,000 00

To construct 8000' of brick conduit 6' x 4'; install 8000' of 4" to 8" pipe and pipe covering; install 8000' of 2" x 4" return pipe; install the necessary valves, expansion joints, fixtures, additional boilers, provide required boiler room space and such other items as may be necessary to heat from a central plant all of the buildings in the Villa Flora Group, Letchworth Group, Village Green Group, Pryor Pavilion, Loomis Infirmary, Industrial Group, etc. The Legislature of 1913 appropriated \$50,000 of the amount (\$125,000) required to install a central heating and power plant at the Colony. Before beginning the heating plant proper the State Architect desires a complete topographical survey of the Colony, showing elevations, water and sewer lines, etc., for making which approximately \$4,000 will be required. There has been for several years past much difficulty experienced during the cold months in heating the Laboratory, the north side of Spratling Hall, Peterson Hospital and several Colony buildings, which are most exposed to the prevailing winds.

Similar request made in 1903, 1904, 1905, 1908, 1909, 1910, 1911, 1912, 1913 and 1914.

Item 23

Placing a basement under two wings of the Trades School, to provide much needed space for the storage of plaster, cement, lumber, engineer's supplies, etc., and for additional space for work shops 3,000 00

Item 24

West House farm dormitory (foundation of Old Six Nations could be utilized)..... \$25,000 00

This building is desired to furnish quarters for several farm hands, an assistant farmer and twenty male patients to work on farm. This building would be the dormitory building for the West Farm Group, a barn for which was recently erected.

Item 25

For applying cement stucco to all buildings at present whitewashed, thus affording a permanent exterior finish 16,500 00

Similar to that on Hoyt Cottage, or a modification such as pebble-dash or rough cast. Your Board at a regular meeting held at the Colony on October 14, 1913, passed the following resolution:

“Resolved, That as funds are available a white stucco be applied as an exterior finish to all brick buildings at the Colony which at present are whitewashed.”

Item 26

A concrete retaining wall to protect the power plant and water softening plant..... 20,000 00

Owing to the great amount of erosion occurring annually at the above mentioned point and also adjoining the site of the water softening plant, it is absolutely essential, in order to avoid great damage in the not distant future, to have erected a permanent retaining wall of sufficient strength to prevent the creek from continuing to wear away the west shore from a point some dis-

tance south of the water softening plant recently installed to a point at the south side of the public highway bridge over Kishaqua creek. Owing to the building of the water softening plant on the bank of Kishaqua creek, immediately south of the colony highway and building of the new power plant and stack north of the same at a point closer to the creek channel than the old boiler house and stack, the erection of such a wall for protection is urgently needed.

Item 27

Piling to protect farm land along the east side of Kishaqua creek north of Dansville and Mt. Morris railroad 1,000 00

As explained elsewhere much damage was done this land in May, 1913, by Kishaqua creek.

Item 28

Extending main horse barn; rebuilding shed adjacent thereto, so as to arrange for an additional root cellar and placing new floor, stalls, etc., in present structure 6,500 00

Item 29

Replacing light service pipe with cast iron water pipe and for connecting all faucets with spring water system 4,500 00

The urgent necessity for making these changes demands early favorable consideration.

Item 30

East wing to central school building 20,000 00

As mentioned in previous reports, the original appropriation for the central school

building was insufficient to construct a building of adequate capacity for all our school work. The bulk of the boys' school instruction has to be given in an old Shaker building, not at all suitable and furthermore needed as soon as vacated, to be used for other purposes. It is desired to extend the school work materially, but such cannot be arranged for until this additional space is available.

Similar request made in 1913 and 1914.

Item 31

Nurses' and Employees' Home, men's group..... 25,000 00

As referred to in the explanation for the necessity for a nurses' home in the women's division, the Colony is also at a great disadvantage in its lack of proper rooms for accommodating many of its attendants and other employees in the groups occupied by male patients. By placing patients, now living in the Letchworth House in the cottages proposed in Item 1, and remodeling the building thus vacated, by removing the fourth floor and placing a new roof on the building, installing proper plumbing, etc., there could be provided a satisfactory employees' home for the Men's Group. Those employees on duty in Letchworth Group, part of those at Loomis Infirmary, Hospital, etc., are without proper accommodations at present.

Item 32

Blacksmith Shop \$3,000 00

The present blacksmith shop is occupying space in the Trades School Building, which is required by the Plumbers' Department

and furthermore because of the fire used by the blacksmith there is afforded a constant menace to the Trades School Building.)

Total \$776,600 00

Item 33

Maintenance for the fiscal year beginning 1916-17 345,000 00

Total \$1,121,600 00

While the grand total is large of the list submitted, it should be borne in mind that the need for the majority of these items has been presented several times previously, some indeed annually for ten years past.

Population and Expenditures for the Year Ending September 3, 1915

Number of patients under date October 1, 1914	752	669	1421
Number of patients admitted during fiscal year	153	88	241
Number of patients discharged or died during year	108	77	185
Number of patients under date September 30, 1915	797	680	1477
Daily average attendance during fiscal year	1450.24		

Expenditures

Salaries and wages	\$135,094 16
Provisions	75,737 49
Other expenses	111,826 09
Total	\$322,657 74

Per Capita Cost

Daily average population	1,450.24
Gross with home product	\$244 16
Gross without home product but with receipts turned into the State Treasury.....	222 49
Net per capita cost	199 25

Admissions During the Fiscal Year 1914-1915

A review of the findings concerning aura, types of seizures, as also frequency and time of occurrence, mentality, prenatal influences, birth injuries, heredity, etc., does not differ materially from the findings in previous years. Information regarding prenatal influences, birth injuries and heredity are of course in the majority of patients meager and in many this information is entirely wanting. The role played by prolonged labor, instrumental delivery and of meningitis or encephalitis, or both, complicating infectious diseases occurring during the first year or two of life cannot be given too much weight in relation to being etiological factors in the development of a subsequent epilepsy.

The assigned cause frequently is but something coincidental, the actual cause being either unknown or if observed, not properly appreciated by those at that time in charge of the individual later epileptic.

As to the time of the occurrence of seizures, it is my opinion that the terms nocturnal and diurnal should be replaced by terms defining the periods when the individual may be either asleep or awake.

A considerable number of patients have, as has so frequently been mentioned by writers, mild or incomplete seizures, which are for a long period unrecognized. It seems well established that more patients have an aura than is ordinarily appreciated. Many of these patients, because of their inferior degree of mentality or because of the very brief time preceding the appearance of the next stage of the seizures, cannot express themselves positively in regard to the existence of this symptom.

SUMMARY OF CONDITIONS PRESENT IN THE RELATIVES OF THE FIRST 4,000 EPILEPTICS ADMITTED TO THE COLONY

Sibs	Father	Paternal grandparents (either or both)	Paternal cousins	Paternal sibs	Mother	Maternal grandparents (either or both)	Maternal sibs	Maternal cousins	Nephews or nieces	Unknown relatives	Total conditions
Epilepsy.....	125	68	44	88	54	93	30	79	27	5	45
Fits, spasms, etc.....	101	38	17	16	11	92	12	21	8	1	6
Drug habitue.....	25	735	38	17	2	94	38	18	1	.....	8
Alcohol.....	104	184	102	47	2	119	145	68	8	.....	973
Tuberculosis.....	45	4	4	59	5	56	47	44	17	.....	797
Lead poisoning.....	44	72	7	43	5	4	10	4	4	.....	403
Insanity.....	20	71	12	5	5	189	10	5	5	.....	16
Infantile convulsions.....	21	4	4	4	4	48	6	5	5	.....	16
Headache.....	22	11	2	8	6	16	3	12	2	1	3
Hysteria.....	5	30	46	2	1	1	1	1	1	1	3
Foolish-minded.....	2	1	1	1	1	1	1	1	1	1	1
Somnambulism.....	13	22	2	4	4	144	11	11	1	.....	83
Migraine.....	28	48	7	8	1	206	50	4	4	.....	135
Nervous.....	307	36	3	3	1	89	77	4	4	.....	267
Rheumatism.....	6	5	30	46	2	.....	.....	.....	.....	.....	619
Cancer and tumor.....	1	1	1	1	1	.....	.....	.....	.....	.....	255
Still born.....	2	9	5	1	1	6	7	7	7	1	1
Paralysis and apoplexy.....	9	77	90	9	1	59	96	12	12	1	5
Kidney, heart, dropsy.....	4	108	48	1	1	81	78	2	2	.....	357
Brain fever, meningitis.....	2	11	2	1	2	.....	.....	.....	.....	.....	222
Hydrocephalus.....	5	1	1	1	1	.....	.....	.....	.....	.....	18
Malaria.....	1	1	1	1	1	.....	.....	.....	.....	.....	1
Died in infancy.....	19	3	8	1	1	6	1	1	1	.....	19
Serofilia.....	2	2	2	1	1	6	1	1	1	.....	8
Goiter.....	2	1	1	1	1	6	1	1	1	.....	2
Pauperism.....	5	5	5	1	1	.....	.....	.....	.....	.....	5
Illegitimate.....	1	5	3	1	1	1	1	1	1	.....	8
Consanguinity.....	18	5	2	2	1	11	2	2	2	2	6
Criminal.....	6	26	1	2	1	6	1	1	1	1	47
Chorea.....	7	32	12	2	1	9	13	1	1	1	8
Sex offender.....	6	8	8	.....	.....	12	.....	.....	.....	.....	40
Syphilis.....	6	7	32	12	2	1	1	1	1	1	14
Deaf mute.....	6	7	32	12	2	1	1	1	1	1	75
Asthma.....	6	7	32	12	2	1	1	1	1	1	20
Rare conditions.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

Munson-Shaw. 1914-1915 — without field work.

Movement of the Population, the Representation from the Several Counties Being as Follows

COUNTIES	Number Present October 1, 1914		Received During THE YEAR		Discharged During THE YEAR		Died During the YEAR		Number Present September 30, 1915	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
	21	14	2	2	2	2	1	1	21	14
Albany	5	5	3	2	1	1	1	1	7	7
Allegany	4	5	3	1	1	1	1	1	6	4
Broome	8	7	1	3	1	1	1	1	8	8
Cattaraugus	12	7	3	1	3	1	1	1	10	7
Chautauque	5	4	1	3	1	3	1	1	4	3
Chenango	4	2	1	1	1	1	1	1	5	6
Clinton	3	4	2	2	2	2	1	1	2	2
Columbia	5	5	2	1	1	1	1	1	2	2
Cortland	3	2	4	1	1	1	1	1	3	4
Delaware	10	8	3	3	1	1	1	1	11	11
Dutchess	45	39	10	7	6	2	4	6	46	39
Erie	4	2	2	1	1	1	2	2	5	3
Essex	7	3	1	1	1	1	1	1	5	3
Franklin	6	4	1	1	1	1	1	1	7	4
Fulton	1	1	1	1	1	1	1	1	1	1
Greene	2	1	1	1	1	1	1	1	3	1
Hamilton	6	4	1	1	1	1	1	1	5	3
Herkimer	108	97	13	13	9	4	2	7	106	98
Jefferson	4	3	2	2	1	1	2	1	1	1
King	3	2	3	3	1	1	2	1	5	3
Lewis	39	25	9	7	2	1	3	1	43	31
Livingston	212	212	40	17	16	4	11	16	6	3
Madison	18	11	2	1	1	1	1	1	11	7
Monroe	8	19	4	1	1	1	1	1	4	2
Montgomery	27	18	11	2	3	1	1	4	35	16
Nassau	12	8	4	1	1	1	1	1	12	19
Niagara	14	4	6	2	1	1	1	1	5	6
Onondaga	1	1	1	1	1	1	1	1	1	1
Oneida	27	24	8	2	1	1	1	1	15	11
Ontario	14	11	6	2	1	1	1	1	13	10
Orange	1	1	1	1	1	1	1	1	1	1
Orleans	1	1	1	1	1	1	1	1	1	1
Oswego	14	11	6	2	1	1	1	1	1	1

ADMISSIONS AND DISCHARGES ARRANGED ACCORDING TO AGE AND SEX

	Over 21		16 to 21		5 to 16		2 to 5		Under 2		Total
	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females	
Present October 1, 1914.....	222	293	169	111	349	256	9	8	3	1	1,421
Received during year ending September 30, 1915:											
Voluntary admissions.....	37	25	19	2	25	11	3	1	.....	.....	122
By judicial commitment, chapter 38, Laws 1914.....	24	27	19	11	22	11	3	1	.....	.....	118
Received from parents or guardian.....	.....	.....	.....	.....	.....	.....	.....	.....	1	.....	1
Total admissions.....	61	52	38	13	47	22	6	1	1	.....	241
Discharged during year ending September 30, 1915:											
To parents or guardians.....	35	20	15	3	6	4	1	.....	2	1	87
To other institutions.....	2	2	4	.....	6	5	6	1	.....	.....	4
Died.....	37	36	19	9	11	10	2	.....	2	1	94
Total discharges.....	74	57	19	9	11	10	2	.....	2	1	185
Remaining October 1, 1915.....	209	288	188	115	385	268	13	9	2	.....	1,477

		Over 21		16 to 21		5 to 16		2 to 5		Under 2		Total
Men	Women	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	
Patients in the Institution October 1, 1914:												
By judicial commitment, chapter 39, Laws 1914:	6	7	5	2	3	2	1	8	3	3	1	25
By commitment of acceptance of poor law officers:	217	286	164	109	346	254	8	8	8	3	1	1,306
	222	293	169	111	349	256	9	8	8	3	1	1,421
Received during year ending September 30, 1915:												
By judicial commitment, chapter 39, Laws 1914:	24	27	18	11	23	11	3	1	1	1	1	118
By commitment of poor law officers:	37	25	19	2	25	11	3	1	1	1	1	123
	61	52	37	13	48	22	6	1	1	1	1	241
Discharged during year ending September 30, 1915:												
Returned to parents or legal guardians:	36	20	15	3	5	4	1	1	1	2	1	87
Transferred to other institutions:	2	2	4	6	5	6	1	1	1	1	1	4
Died:	37	35	35	4	6	6	1	1	1	1	1	94
	75	57	19	9	10	10	2	2	2	2	1	185
Patients remaining in the institution September 30, 1915:												
By commitment (judicial), chapter 39, Laws 1914:	24	31	20	13	25	13	3	1	1	1	1	130
By commitment of acceptance of poor law officers:	184	257	167	102	362	265	10	8	8	2	2	1,347
	208	288	187	115	387	268	13	9	9	2	2	1,477

Nativity of Patients Admitted During Year Ending September 30, 1915

Of the 241 patients admitted to the Colony during the year ending September 30, 1915, 38 or 15 per cent. were foreign-born, and 203 or 84 per cent. were native-born. In 104 of the native-born, both parents were native-born, and in 61 of the native-born, both parents were foreign-born. The fathers of 118 of the native-born, were themselves native-born and 90 foreign-born. The mothers of 129 of the native-born, were themselves native-born, and 64 were foreign-born.

Evidence of Paralysis in 4314 Cases Admitted to the Craig Colony

Right hemiplegia.....	292
Left hemiplegia.....	307
Paraplegia	31
Monoplegia	70
Diplegia	26
Facial paresis.....	34
	—
	760

Surgical Operations, October 1, 1914 to October 1, 1915

Appendectomy	12
Appendiceal abscess.....	1
Decompression, cerebral cyst.....	2
Decompression, old depressed fracture.....	1
Ileo-sigmoidostomy	7
Caeco-sigmoidostomy	2
Ovariotomy	1
Salpingo-oophorectomy	1
Amputation	1
Drainage — extensive infections.....	14
Hemorrhoids	3
Venesection	5
Removal — naevus of face.....	1
Circumcision	3
Ischio, rectal abscess	2

LOOMIS INFIRMARY FROM WEST.



Lumbar puncture.....	11
Plastic operation of face.....	1
Uterine curettage.....	1
Gastrotomy and enterotomy — foreign body.....	1
Tonsils removed.....	5
Turbinectomy	6
Large sebaceous cyst.....	2
Exploratory coeliotomy — carcinoma of liver.....	1
Compound fracture.....	1
Herniotomy	2
Ankylosed joints.....	3
Popliteal cyst.....	1
Rarefying osteitis.....	1
Cervical adenectomy.....	3
Vaginal abscess.....	1
Extensive lacerations about head, face and extremities....	9

Dentist

The resident Dentist accomplished during the fiscal year just closed the following:

Examinations	1,894
Cleanings	1,238
Treatments	492
Extractions	758
Fillings, cement	66
Fillings, amalgam	956
Fillings, root	103
Fillings, porcelain	42
Partial plates	39
Full plates	6
Crown gold	10
Pivot work	30
Gutta Percha	4
Special treatment:	
Alveolar abscesses	25
Epulis removed	2
Ulcers treated	15
Stomatitis	3

Record of Seizures for Year Ending September 30, 1915

1914	Male			Female			Grand total for Month
	Day	Night	Total	Day	Night	Total	
October	3545	3600	7145	3039	1809	4248	11, 993
November	3570	3364	6934	2972	1733	4705	11, 639
December	3343	2998	6341	2986	1857	4843	11, 184
1915							
January	3408	2926	6334	2869	1774	4643	10, 977
February	3150	2769	5919	2788	1881	4669	10, 588
March	3465	3063	6528	3422	2153	5575	12, 103
April	3249	2850	6099	2989	1992	4981	11, 080
May	3947	3322	7269	3072	1931	5003	12, 272
June	3608	3097	6705	3415	2248	5663	12, 368
July	3538	2865	6403	3450	1926	5376	11, 779
August	3336	3015	6351	3334	2142	5476	11, 827
September	2998	2896	5894	2867	1912	4779	10, 673
Grand Total							138, 483

MALE

Day	41, 157
Night	36, 765
Total	77, 922
FEMALE	
Day	37, 203
Night	23, 358
Total	60, 561
Grand Total	138, 483

Employment of Patients October 1, 1915

Males

Bakery	4
Barber	3
Brickyard	18
Butcher shop	2
Blacksmith shop	3
Carpenter shop	14
Coal yard	7
Dairy barn	10
Dining rooms	28



BASEBALL IS THE POPULAR SPORT AT THE COLONY. DURING 1915 THE COLONY WON 12 OUT OF 17 GAMES PLAYED
WITH OUTSIDE TEAMS.

Drug room	1
Farm	26
Forestry work	6
Filter beds	3
Firemen's helpers	8
Garden	33
Grading	12
Kitchen	50
Laundry	21
Lawns	17
Mattress shop	10
Mason	3
Messengers	7
Paint shop	4
Printing shop	3
Power house	3
Plumbing shop	4
Photographer	1
Piggery	3
School	42
Storeroom	3
Store	3
Stables	4
Shoe shop	2
Teamsters helpers	6
Tailor shop	10
Tinsmith	1
Ward work	155
Hennery	1
Idle	259
	790

Females

Ward work	152
Sewing room	31
Laundry work	38
Clothes rooms	6

Kitchen	47
School	58
Office work	3
Messengers	3
Garden	35
Idle	402
	775

Number Admitted Each Year According to Sex

Year	Male	Female	Total
1896.	69	76	145
1897.	86	22	108
1898.	62	95	157
1899.	53	42	95
1900.	223	117	340
1901.	198	61	259
1902.	116	66	182
1903.	72	88	160
1904.	107	70	177
1905.	119	135	254
1906.	115	79	194
1907.	127	64	191
1908.	173	145	318
1909.	163	123	286
1910.	169	91	260
1911.	164	105	269
1912.	130	97	227
1913.	140	106	246
1914.	125	86	211
1915.	152	88	240

Number of Patients Present September 30th, of Each Year

1896.	63	70	133
1897.	130	84	214
1898.	155	167	322
1899.	173	205	378
1900.	329	283	612

Year	Male	Female	Total
1901.....	440	303	743
1902.....	494	332	826
1903.....	483	348	831
1904.....	513	385	898
1905.....	575	475	1,050
1906.....	577	476	1,053
1907.....	601	480	1,081
1908.....	667	565	1,232
1909.....	693	608	1,301
1910.....	716	635	1,351
1911.....	761	659	1,420
1912.....	745	673	1,418
1913.....	763	664	1,427
1914.....	752	669	1,421
1915.....	797	680	1,477

ADMISSION BY COUNTIES SINCE OPENING OF THE COLONY

Age on Admission in 4314 Patients Admitted to Craig Colony

Under 5 years.....	44
5 to 10 years.....	269
10 to 15 years.....	719
15 to 20 years.....	973
20 to 25 years.....	737
25 to 30 years.....	433
30 to 35 years.....	351
35 to 40 years.....	260
40 to 45 years.....	182
45 to 50 years.....	144
50 to 55 years.....	87
55 to 60 years.....	60
60 to 65 years.....	31
65 to 70 years.....	19
70 to 75 years.....	4
90 to 95 years.....	1
	<hr/>
	4,314

Statistics of the Institution for the Year Ending September 30, 1915

Number of patients in institution October 1, 1914.....	1,421
Number of patients received during the year.....	240
Number of infants born in hospital.....	1
Total number cared for during year.....	<hr/> 1,662

Discharged During the Year Ending September 30, 1915

Infants born in hospital: discharged to parents or guardians	1
Other patients:	
Recovered	12
Improved	38
Unimproved	33
Transferred to other institutions.....	4
Otherwise discharged	4
Died	94
Total number discharged and died.....	<hr/> 185



HORSE BARN SHOWN IN CENTER COULD READILY BE EXTENDED TO RIGHT.

Remaining in Institution September 30, 1915

Males (including infants born in hospital).....	797
Females (including infants born in hospital).....	680
Total remaining	1,477

Since the opening of the Colony in January, 1896, there have been 4,314 patients under treatment. Of these there have been discharged as:

Recovered	74
Improved	589
Unimproved	715
Insane	147
Died	1,310
Otherwise discharged	6
Total	2,841

The highest daily census during the year was.....	1,483
The lowest daily census during the year was.....	1,411

DISCHARGES

	Re-covered	Im-proved	Unim-proved	Insane	Not epi-leptic	Deaths	Total
October:							
Males.....		4	3			7	14
Females.....		1	1		1	7	10
November:							
Males.....	1	5	2			3	11
Females.....	1	1	1			5	8
December:							
Males.....		2	2			4	8
Females.....	1	.....	.....			2	3
January:							
Males.....		4	.....				4
Females.....	1	3	2			6	12
February:							
Males.....	1	2	2			4	9
Females.....	1	.....	.....			2	3
March:							
Males.....	1	.....	2			4	7
Females.....	1	1	1			4	7
April:							
Males.....		.....	1			6	7
Females.....		.....	.....			2	2
May:							
Males.....		3	2	1	1	3	10
Females.....	2	1	2	.....		1	6
June:							
Males.....	1	2	3	.....	1	3	10
Females.....	.....	.....	.....			6	6
July:							
Males.....	1	4	.....		1	4	10
Females.....	.....	1	3	.....		1	5
August:							
Males.....		.....	3	.....		4	7
Females.....		.....	1	.....		9	10
September:							
Males.....		3	2	1	.....	5	11
Females.....	.....	1	.....	2	.....	2	5
	12	38	33	4	4	94	185

NUMBER	Sex	AGE AT DEATH Yrs. Mos. Das.	Duration of epilepsy	Cause of death		
				RESIDENCE AT THE COLONY.	Yrs.	Mos.
1.	Female	41	17	22 years.	14	5
2.	Male	37	3	Unknown.	2	7
3.	Male	61	10	27 years.	6	9
4.	Male	53	6	26 years.	6	9
5.	Female	21	6	24 years.	6	9
6.	Female	15	2	28 years.	5	7
7.	Male	60	0	Unknown.	2	3
8.	Female	21	8	21 years.	4	9
9.	Female	21	6	11 years.	5	14
10.	Female	24	0	20 years.	4	5
11.	Male	31	8	27 years.	9	3
12.	Female	25	14	14 years.	17	9
13.	Male	46	5	14 years.	6	7
14.	Male	35	7	26 years.	13	8
15.	Male	23	14	15 years.	3	15
16.	Female	19	5	Unknown.	1	11
17.	Female	12	8	18 years.	5	4
18.	Female	30	11	20 years.	4	1
19.	Female	16	6	22 years.	3	0
20.	Male	37	2	13 years.	3	28
21.	Male	23	13	Unknown.	1	3
22.	Female	27	5	21 years.	11	5
23.	Male	63	6	14 years.	4	11
24.	Female	27	7	16 years.	4	1
25.	Male	44	6	33 years.	18	6
26.	Male	16	10	16 years.	2	13
27.	Female	55	10	Unknown.	5	28
28.	Male	47	10	10 years.	6	7
29.	Female	53	2	30 years.	6	8
30.	Female	68	10	3 years.	6	4
31.	Female	40	9	28 years.	3	8
32.	Female	14	4	4 years.	2	2
33.	Female	47	7	0	8	13
34.	Female	14	12 years.	5	5	
35.	Female	46	4	10 years.	5	8
36.	Male	36	1	18 years.	2	1
37.	Male	48	8	6 years.	2	2
					29	6

36	Male	37	13	4	Exhaustion following seizures.
39	Female	33	8	2	Pulmonary tuberculosis.
40	Male	43	10	5	Facial erysipelas.
41	Female	61	10	5	Uraemia.
42	Male	42	10	9	Lobar pneumonia.
43	Male	43	13	10	Epileptic seizure.
44	Female	32	15	0	Epileptic seizure.
45	Male	11	23	4	Pulmonary edema following serial seizures.
46	Male	30	10	19	Pulmonary edema. Acute hepatitis.
47	Female	53	0	11	Leptomeninxitis.
48	Female	33	7	7	Interstitial nephritis.
49	Male	14	4	20	Pulmonary edema. Status epilepticus.
50	Male	32	7	1	Pulmonary edema following serial seizures.
51	Male	14	8	6	Pulmonary tuberculosis.
52	Female	62	6	6	Brocho pneumonia.
53	Male	33	4	26	Pulmonary edema. Epileptic seizure.
54	Male	4	9	25	Leptomeninxitis.
55	Male	38	3	1	Pulmonary edema.
56	Female	15	9	0	Pulmonary edema.
57	Male	23	0	5	Pulmonary edema.
58	Male	35	1	11	Pulmonary edema.
59	Male	27	4	19	Cerebral hemorrhage.
60	Female	15	1	27	Exhaustion following seizures.
61	Female	45	15	10	Exhaustion following seizures.
62	Female	30	0	19	Pulmonary edema.
63	Male	26	9	9	Epileptic seizure.
64	Male	16	6	23	Exhaustion following seizures.
65	Female	27	8	9	Tubercular pneumonia.
66	Female	27	4	16	Tubercular pneumonia following seizures.
67	Female	11	27	11	Pulmonary edema following seizures.
68	Male	4	10	10	Pulmonary edema following seizures.
69	Female	24	7	19	Epileptic seizure.
70	Female	16	2	26	Exhaustion following seizures.
71	Male	27	1	10	Tubercular pneumonia.
72	Male	14	1	10	Post operative exhaustion.
73	Male	22	1	13	Epileptic seizure.
74	Male	26	9	9	Pulmonary edema following seizures.
75	Female	47	3	11	Broncho pneumonia.
76	Male	62	35	0	Chronic parenchymatous nephritis.
77	Female	27	1	0	Chronic nephritis and endocarditis.
78	Male	10	4	17	Epileptic seizure.
79	Female	22	10	9	Chloroform narcosis.
80	Male	5	10	4	Epileptic seizure.
81	Female	42	9	36	Tubercular enteritis.
82	Female	18	1	17	Pulmonary tuberculosis.
83	Female	61	9	6	Tubercular enteritis.
84	Female	55	3	16	Carcinoma of liver.
85	Female	18	6	4	Exhaustion following seizures.

NUMBER	SEX	AGE AT DEATH		DURATION OF EPILEPSY	RESIDENCE AT TIME OF DEATH		CAUSE OF DEATH
		YR.	MOS.		YR.	MOS.	
86.....	Male.....	60	10	17 years.....	6	9	19
87.....	Female.....	73	9	9 years.....	6	8	13
88.....	Male.....	38	3	13 years.....	2	4	16
89.....	Male.....	44	11	43 years.....	15	2	8
90.....	Male.....	52	2	42 years.....	4	3	16
91.....	Female.....	43	6	23 years.....	10	11	18
92.....	Female.....	43	41	41 years.....	12	4	18
93.....	Male.....	28	12	10 years.....	9	2	4
94.....	Male.....	17	2	Unknown.....			17



A FEW BASKET BALL ENTHUSIASTS.

Thus far since the opening of the Colony the average age at death, in a total of 1,320 deaths, has been a trifle over 30 years. The percentage of deaths during the Fiscal Year just closed, as based upon the total inmate population, has been 5.6 per cent, being a lower percentage than that obtained for many years past.

**Length of Residence at Colony in Case of Death in 1320 Deaths,
Occurring Since the Opening of the Colony**

5 days and under.....	4
10 days and under.....	6
15 days and under.....	5
20 days and under.....	4
25 days and under.....	8
30 days and under.....	20
2 months, approximately	33
3 months, approximately	28
4 months, approximately	24
5 months, approximately	30
6 months, approximately	21
7 months, approximately	23
8 months, approximately	15
9 months, approximately	13
10 months, approximately	15
11 months, approximately	18
12 months, approximately	35
1 year 3 months, approximately.....	32
1 year 6 months, approximately.....	37
1 year 9 months, approximately.....	36
2 years, approximately	49
2 years 3 months, approximately.....	38
2 years 6 months, approximately.....	29
2 years 9 months, approximately.....	21
3 years, approximately	32
3 years 3 months, approximately.....	29
3 years 6 months, approximately.....	29
3 years 9 months, approximately.....	33
4 years, approximately	30
4 years 3 months, approximately.....	25
4 years 6 months, approximately.....	28

4 years 9 months, approximately.....	26
5 years, approximately	21
5 years 3 months, approximately.....	25
5 years 6 months, approximately.....	24
5 years 9 months, approximately.....	20
6 years, approximately	27
6 years 3 months, approximately.....	22
6 years 6 months, approximately.....	28
6 years 9 months, approximately.....	18
7 years, approximately	28
7 years 3 months, approximately.....	14
7 years 6 months, approximately.....	22
7 years 9 months, approximately.....	11
8 years, approximately	21
8 years 3 months, approximately.....	14
8 years 6 months, approximately.....	12
8 years 9 months, approximately.....	16
9 years, approximately	16
9 years 3 months, approximately.....	17
9 years 6 months, approximately.....	10
9 years 9 months, approximately.....	10
10 years, approximately	8
10 years 3 months, approximately.....	7
10 years 6 months, approximately.....	9
10 years 9 months, approximately.....	11
11 years, approximately	12
11 years 3 months, approximately.....	10
11 years 6 months, approximately.....	8
11 years 9 months, approximately.....	7
12 years, approximately	11
12 years 3 months, approximately.....	3
12 years 6 months, approximately.....	4
12 years 9 months, approximately.....	6
13 years, approximately	7
13 years 3 months, approximately.....	8
13 years 6 months, approximately.....	7
13 years 9 months, approximately.....	7
14 years, approximately	2

14 years 3 months, approximately.....	2
14 years 6 months, approximately.....	5
14 years 9 months, approximately.....	3
15 years, approximately	4
15 years 3 months, approximately.....	2
15 years 6 months, approximately.....	4
15 years 9 months, approximately.....	2
16 years, approximately	3
16 years 3 months, approximately.....	1
16 years 6 months, approximately.....	2
16 years 9 months, approximately.....	3
17 years, approximately	1
17 years 3 months, approximately.....	2
17 years 9 months, approximately.....	1
18 years, approximately	2
18 years 6 months, approximately.....	4
<hr/>	
	1,320
<hr/>	

TREATMENT

The symptoms which are observed in epilepsy are, so far as our present knowledge goes, due to various underlying factors varying from gross hereditary defects of the central nervous system as the chief basic factor to certain unknown hypothetical disorders of metabolism, etc.

Many writers point out that symptomatic epilepsy and the genuine or so called idiopathic epilepsy cannot be clinically differentiated in most instances. Toxins affecting the essential cortical cells either directly or indirectly probably are the direct cause of symptoms.

The intestinal abnormalities of function so commonly seen play without doubt an important part in the production of symptoms in many epileptics. Absorption of toxic products as the result of intestinal kinks, bands, leakage of the ileo caecal valve, etc., may apparently be relieved by operative interference based upon careful diagnoses the result of X-Ray examination, palpation, etc., of the abdomen.

Drs. W. S. Bainbridge and Eliza M. Mosher of New York examined many of our patients by the latter method and Drs. L. G. Cole and F. A. Finnerty of New York by the former. Their findings are to be published.

An up-to-date X-Ray equipment so long desired will soon be installed in the Colony Hospital, thus permitting the making of such examinations of the head and trunk possible.

Dr. John T. McCurdy of New York recently examined a considerable number of our patients along the line of psychic factors in the development and course of epilepsy.

In Dr. Munson's report from the Colony Laboratory reference is made to findings in tests made for evidences of hereditary and acquired syphilis.

As evidence showing the possible relationship between syphilis and epilepsy, I will present nine brief abstracts of histories of

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NASTURTIUM AND ORCHID COTTAGES FOR YOUNG FEMALE COLONISTS OF SCHOOL AGE.

patients at Craig Colony in whom evidences of syphilis being present was obtained. It will be seen that while in most the causative relationship between the syphilis and the epilepsy is quite clear there is some doubt as to such relationship in the cases of Harry B. and Mark K. M.

No. 3368. Edmund S. Admitted August 24, 1911. Born April 24, 1894. Father German, mother Italian. Four maternal cousins had "hysteroepilepsy." Patient born at full term, said to have been infected with syphilis by a wet nurse when an infant. Born in Italy, came to United States in 1902. Apparently ordinary health until age of 14 years when first epileptic seizure occurred, grand mal, in type. The second occurred two months later. Early in 1911, previous to admission to Colony, Wassermann test was positive, following which he received mercurial treatment. Upon admission to Colony he was well nourished, right knee jerk more active than the left, all reflexes sluggish. No paralysis. Occasional headache, following seizures, bone pains at night. Mental status good. November 10, 1911, Wassermann test made in Colony laboratory positive. Shortly after he was given salvarsan 6 grams intravenously. February 1, 1912. Specific skin lesion very slow in healing. Frequent nocturnal seizures. Strikes other patients. Wassermann continued positive. July 21, 1912, while another patient was preventing him from striking a third patient, Edmund S. whipped out a pocket knife and stabbed the other patient in the upper chest, wound penetrating ascending aorta, producing death. Edmund S. transferred to Matteawan State Hospital.

No. 3154. Harry B. Born March 15, 1878, single, admitted to Colony November 26, 1910. Mother died at 44 years of gastric cancer. Father died at 71 years of some heart disorder. Had apoplexy at 45 years, resulting in left hemiplegia. Paternal uncle of patient has been in hospital for the insane for twenty-six years. Early history of patient apparently negative. He had apoplexy at 22 years of age with resulting left hemiplegia. First convulsive seizure occurred at 30 years, following which seizures recurred from four to eight weeks, apparently severe in type. Well nourished, some fibrillary twitchings and tremor of tongue on extension. Temperature sense disturbed in the left hand and arm.

Mental status fair. Wassermann test made February, 1912, doubtfully positive, one made January, 1914, slightly positive. The question in this case is: had patient hereditary or acquired syphilis? What relation had the syphilis to the epilepsy?

No. 3899. Daniel F. E. Admitted November 18, 1913. Born March 10, 1887. Swede, waiter by occupation. Came to America when 13 years old. Family of patient is negative as to history. First epileptic seizure occurred at the age of 21 years. Physical condition upon admission well nourished. No paralysis. Moron. Patient gave a history of being sexually immoral for quite an extended period. Wassermann examination January, 1914, positive. Salvarsan given intravenously, followed by marked reaction. Neosalvarsan given May, 1914, with reaction similar to use of salvarsan. At the present time physical condition improved, seizures less frequent.

No. 3889. Mark K. M. Admitted November 3, 1913. Born October 20, 1880. Divorced. Is a traveling salesman. Paternal grandfather died at 48 years of apoplexy. Father said to have had epilepsy. Maternal aunt said to have had convulsions. Majority of mother's people "nervous." Patient's father had first epileptic fit when 30 years of age, another at 33, one at 35 and one at 36, following which seizures increased until he had one every nine months. Paternal uncle paralyzed for more than thirty years, following early apoplexy. Patient born at full term delivery natural. Mother said to have been much depressed and worried previous to birth of patient. He made good progress at school which he first attended at the age of 5 years. Had scarlet fever at 7 years, measles at 8, pertussis at 8 and diphtheria at 15 years. Diphtheria said to have been very severe, patient nearly dying. Patient worked as clerk in a grocery store at 18 years but had to leave on account of failing health. First convulsion said to have occurred at 33 years while patient was in a theater in evening. He did not return to consciousness until he found himself at home and in bed. Second seizure occurred one month later. Bites tongue and urinates during seizures. Memory has failed and he is more irritable in disposition. Marked prostration following seizures, which after admission to the Colony present themselves in series. Physical examination upon admis-

sion showed valvular heart disease, poor physical condition, marked flat feet. Skin pale, as also mucous membranes. Passed the mental test at adult age. Owing to late onset of epilepsy, Wassermann test was made shortly after admission to the Colony. *varsan* was given intravenously, with some improvement as to epilepsy, but considerable improvement in general health. Seizures occurring at intervals. Has patient hereditary or acquired syphilis, causing epilepsy or is syphilis only incidental in an individual with an hereditary predisposition to epilepsy?

No. 3167. John F. M. Admitted October 4, 1912. Born January 15, 1878, widower, locomotive engineer. Father alcoholic. Sister died at 35 years of epilepsy. Patient apparently well during infancy and childhood. In 1900 was infected with syphilis. Had secondary symptoms following which he received treatment over a considerable period. First epileptic seizure occurred in 1908, patient falling down stairs at time. He says, however, that sometime before this he had spells which he later thought were mild epileptic seizures, during this he had a queer feeling and it was impossible to concentrate his mind on any subject. After his admission to Colony, he had both severe and mild seizures, the mild ones being characterized by patient as an "all gone feeling." Very automatic following such seizures, attempting to assault those about him, and run out of the building. Mind deteriorated progressively since onset of seizures. Well nourished physically. Obstinate constipation. Wassermann test made May, 1911, proved positive, following which *salvarsan* was given intravenously without marked improvement of epilepsy. August 1, 1911. Wassermann still positive. Given another dose of *salvarsan*. October 4, 1912, found dead, death having apparently occurred following a seizure. Coroner's autopsy showed petechial hemorrhages over upper chest and arms. Marked cyanosis of face. Ventricles enlarged, contained considerable fluid blood. Brain substance weighed 1515 grams. General signs of increased intracranial tension. Considerable intimal change in aorta. Was epilepsy induced by syphilis in defective person?

No. 3300. Charles F. Y. Admitted May 25, 1911. Born March, 1878. Father a physician, said to have been epileptic,

died at 50 years of apoplexy. Mother died at 45 years of gastric cancer. Paternal grandmother hysterical. Paternal aunt epileptic. Patient seemingly normal during early life. Made good progress in school. Had scarlet fever at 12 years, diphtheria at 14 years. Onset of epilepsy at 20 years. Infected with syphilis at 28 years of age. Seizures occurred at first once a year, but later from six to eight times a year, usually diurnal and Grand Mal in type. Physical examination showed chronic heart lesion well compensated. Patient had ataxic paralysis at time of admission, result of syphilis in a person already epileptic previous to infection of syphilis.

No. 3087. George D. K. Admitted August 4, 1910. Born March 17, 1883. Married. Father died at 37 years of tuberculosis, paternal grandmother of same disease at 40 years of age. Maternal grandmother had fainting spells. Maternal uncle became insane at 50 years living 25 years thereafter. Maternal first cousin insane. Patient's early life apparently uneventful, had pertussis at 4 years, measles at 5 years and scarlet fever at 8 years. On September 25, 1907, patient had a typical cerebral hemorrhage with complete right hemiplegia, remaining in bed four weeks. First and second convulsive seizure occurred on March 8 and May 1, 1908. Mental status fair. Three Wassermann tests made proved negative. Luetin suspicious. What was cause of early cerebral hemorrhage?

No. 3000. Carrie L. Admitted March 10, 1910, married. Born January 7, 1875. Common school education. Mother died at 20 years after confinement. Father living. One of grandfathers said to have had convulsions. Father has headaches. Mother nervous. Patient born at full term, had frequent nose bleeds during early life. Had scarlet fever at 7 years, measles, chorea, diphtheria and pertussis at age of 9 years. First convolution occurred at 36 years, being severe in type. Previous to onset of epilepsy patient had considerable domestic trouble. Mental deterioration progressive since appearance of seizures. Following seizures in 1910 patient had paralysis of left arm and was seriously ill for a time, after which paralysis became much less marked. Apparently poorly nourished at time of admission to the Colony. Both breasts atrophied and patient not menstruating.



WEST GROUP, NEW COMBINATION DORMITORY AND EMPLOYEES' COTTAGE NEEDED TO ESTABLISH FARM COLONY IN THIS GROUP.

Discharge of thin pus from the left ear which patient said had been present for seven years. Ptosis bilateral of both lids. Pupils normal when admitted, pulse irregular. Tongue coated, and patient markedly constipated. Poor co-ordination. Diminished tactile and pain sense. Knee jerks sluggish. On December, 1910, presented a slight right hemiplegia, following convulsive seizures. A few days later it was noticed that she was totally blind. She became very lachrymose and her mental condition was much deteriorated. Ophthalmoscopic examination showed double optic atrophy with poor prognosis for vision. June 1, 1911, considerably improved physically. June 1, 1912, had 119 seizures, severe, during the last year. June 1, 1914, progressive deterioration, both mentally and physically. November, 1914, a large, apparently specific ulcer present on the right side of forehead. April, 1915, Wassermann positive, also one repeated in July, 1915. Did syphilis induce epilepsy in a predisposed person?

No. 1378. John C. Mc. Admitted March 24, 1910, aged 14 years. Said to have had a fall on the head at six months, causing cerebral hemorrhage. Mother worried previous to birth of patient because her family were not pleased with her marriage. She at the time was very depressed. So far as husband was concerned, however, her married life was very pleasant. She was of a nervous temperament, subject to periodical headaches and sick headaches. Patient is the oldest of four children, one of whom had convulsions during teething. Patient had first convolution at nine months. At the age of 6 years patient had whooping cough, during which he developed a paralysis of the left side. Mother of patient said that directly after birth he continued to cry for several days. Some of the seizures are Grand Mal in type and others Petit Mal, followed by automatism. Is feeble-minded. Seizures recur at intervals during subsequent years of residence at the Colony, averaging 10 per month. Wassermann test made November 7, 1912, strongly positive. As also one November 2, 1912. Was paralysis at 6 years the result of a cerebral hemorrhage, occurring during a paroxysm of pertussis? Did a pre-existing syphilis render vessel walls weak and thus pave the way for the hemorrhage?

Investigators report that less than 15 per cent. of the general population give definite positive findings of syphilis.

FIELD WORK

The importance of having available at all times a trained person who could go into the various parts of the State to ascertain facts relative to the family and personal history of our patients would be of the upmost value from a scientific standpoint. Such a person could also be of much assistance in disseminating in various communities proper ideas regarding defectiveness and common sense means of endeavoring to control its increase. A great number of State institutions in various parts of the country are doing work of this kind; and if the Colony is to be considered as remaining in the front rank, it must do likewise. An appeal has been made for over five years to have this work inaugurated, but funds have not as yet been made available.

Through the courtesy of the Bureau of Analysis of the State Board of Charities, Miss Florence Smith has done conscientious work in a number of families of Colony patients. The services of Miss Smith are but temporary, however, so it is to be hoped that ere long a regularly appointed permanent officer may be allowed.

As an example of what may be done along that line of research a family history and chart is presented with this report.

All who have at heart the welfare of their neighbor must in order that those of their fellow-beings of subnormal mentality be properly cared for, do what they can toward arousing in their particular community a proper sentiment for the providing of a means for suitable supervision for this unfortunate class.

All consistent effort possible should be exerted to educate the public regarding established facts concerning the deleterious influences of a bad heredity and how much proper application of common sense methods of changing and bettering environmental conditions may, often to a surprising degree, result in an improvement of a defective individual if applied early in life.

History of George R. C., admitted to Craig Colony, April 30, 1912.

The Patient and His Home

V-25. George R. C. was born April 30, 1888. He is second in line of a fraternity of six boys and one girl. The mother claims also to have had eleven miscarriages. Previous to his birth his mother states that she was abused by her husband and greatly worried by his intemperance. The patient was born at full time and there was nothing abnormal about the circumstances of his birth. He was a strong baby, but was subject to indigestion and cried a great deal. He teethed at 6 months, walked at 18 months and talked at 2 years. He had the common children's diseases including measles, whooping cough, etc., and typhoid fever at 7 years. He began school at six years and made fair progress, going to about the seventh grade. He is not remembered as having had any accident previous to his first attack which occurred when he was 12 years of age. The attacks usually occurred in a series being more severe at first and growing lighter. They increased in frequency until in March, 1912, he was having as many as 4 or 5 a day. His aura is usually that some one is after him. Following the attack he is likely to sleep or wander and some times picks at his clothes or tries to remove them. At the time of his admission his memory was noticeably affected. His habits were said to be gluttonous. His mother stated that he was able to cut wood and do similar tasks. He is of average size and fair appearance, having no asymmetry of face or skull and no pronounced bodily defects. His physical examination revealed no evidence of syphilis or rheumatism and no skin eruptions. The skin showed some anaemia but no jaundice, dropsy, flushing or cyanosis. The patient is subject to constipation and to headaches after attacks. His mentality is rated as 11 years according to the Binet Test. The record since admission shows no change in condition except a slight increase in attacks noted in July, 1913.

Native Environment

General.—A small village one mile from a railroad station. Rural interests. No active industries.

Immediate.—The home is a small wood colored house, a story and a half high containing three rooms. It is poorly furnished, dirty, dilapidated and disorderly. There is no evidence of systematic housekeeping or thrift.

Financial condition poor; income irregular.

Home treatment poor; probably neglected as a child.

Education — To about seventh grade.

The Patient's Fraternity

V-24. William J. C., died at 6 months in convulsions. The cause of death as stated by the mother was whooping cough and cholera infantum.

V-25 is the patient.

V-26. John E. C., born 1891, is described as one of the more promising members of the family. A physician considered him defective nevertheless. He is a farm laborer, drinks some, but works steadily.

V-27. Arthur R. C., born 1896, has been partially paralysed since seven years of age. He went only as far as the third grade in school, is decidedly feeble-minded and incapable of self support. He was committed to an almshouse because his father refused to support him.

V-28. Otis W. C., born 1894, was committed to the State Agricultural and Industrial School at Industry, April 13, 1907, for burglary in the third degree. His record at the institution seems to have been good as no complaints are recorded in the history. He was paroled June 27, 1908, to an employer at Sodus Point. In 1909 he changed places of employment. Reports were received from him from 1910 to 1912 after which he was lost track of. No definite account has been obtained of his mentality or habits.

V-29. Cora E. C. was born in November, 1902. She had convulsions in infancy. Has always been considered in good health. Her features are regular but her face is somewhat heavy and dull. As a rule she has spent two years in a grade; at the present time is in the fifth grade and her teacher thinks that she will not be capable of further progress. A physician considered her mentally defective.

V-30. Dewey O. C., born in 1900, is according to report, the illegitimate child of a blacksmith, a man of fair mentality. He is thought to resemble his father. At 15 years of age he is in the sixth grade in school and doing fair work. His teacher

thinks he will not be capable of going further on merit. He is inclined to be nervous and often cries when spoken to in school.

The Patient's Father

IV-15. Horatio C. was born in 1856. He is mentally defective, shiftless and a periodical drinker; might be a steady drinker except that he lives in a dry town and has to go some distance for liquor. It is said that two glasses of whiskey will make him ugly and "crazy drunk." He has a jail record for drunkenness and assault; also has been arrested for non-support. In his family relations he is brutal and selfish, mal-treats his wife and children, and buys food for himself and refuses to share it with them. He works irregularly and does not seek steady employment; but will work well if set at a task like chopping wood. Is physically strong and well built; appearance is fair except for a slouching attitude and slow gait. He has little or no education and probably would not have been capable of acquiring much, as his mental processes are slow and his memory is poor. In the interview he recalled the names of his brothers and sisters slowly and frequently appealed to his wife for information in regard to his own family. According to reports received from various sources, he has always sought the company of immoral women. In the community where he lives he is considered feeble-minded and anti-social.

The Father's Fraternity

IV-2. Willie C. the oldest of the fraternity died in infancy.
Cause unknown.

IV-3. Sallie C. died in childhood, cause unknown.

IV-5. Augustus Eugene C., commonly known as Jean C., was born in 1847. He was more active and intelligent than his brother Horatio; was a paper hanger and a painter by trade and is thought at one time to have owned property. He drank some, was a wanderer, and is known to have deserted two women by whom he had children. Reports are current to the effect that he served time for stealing, but on account of his wandering habits these could not be substantiated. His first union was with Mary M. (c-?) an immoral woman who claims to be related to him

but whose relationship cannot be established. He deserted her after she had had one child by him and married another woman deserting her likewise after she had had one child. He then went west where he went under the alias of George M. He is reported to have served a prison term while in the west. In 1913 he was admitted to a county hospital where he remained for five months. He died there May 24, 1914. The cause of death as stated in the record was pernicious anaemia, the contributory causes being myocarditis and arterio-sclerosis. His body was returned to his native town where he was buried at public expense.

Descendants.—V-14. Charlie C., a son by Mary M. previously mentioned is considered of average intelligence, he is temperate and industrious. Is a tinsmith by trade. Health poor, is subject to bronchial troubles; is emaciated and is thought to have tubercular tendencies. Married. No children. There are no other known living descendants.

IV-4. Mary Louise C. is said to have been epileptic since four or five years of age. As a young girl she assisted her mother by doing laundry work. She was committed to a State hospital. The diagnosis of the case is epileptic psychosis. According to the hospital records, her condition was supposedly caused by bad heredity and abuse on the part of her father. At the present time her mental condition has deteriorated to such an extent that it is impossible to obtain reliable information from her. She never married and has no descendants.

IV-7. Wash C. was decidedly feeble-minded as was indicated by his appearance and gait. As a boy it was impossible to keep him in school on account of his wandering habits. When a small child he would often disappear for several days without any apparent cause. On reaching maturity he became shiftless, restless and alcoholic. The county jail record shows that he was arrested for petit larceny in November, 1887. He married a low type of a woman with whom he lived for a time. Was usually employed as a laborer. He is said to have died of Bright's disease at the age of 54, left no descendants.

IV-8. Oliver C., born about 1851, is a tall well built man, physically strong but slow of movement and indolent in his habits,

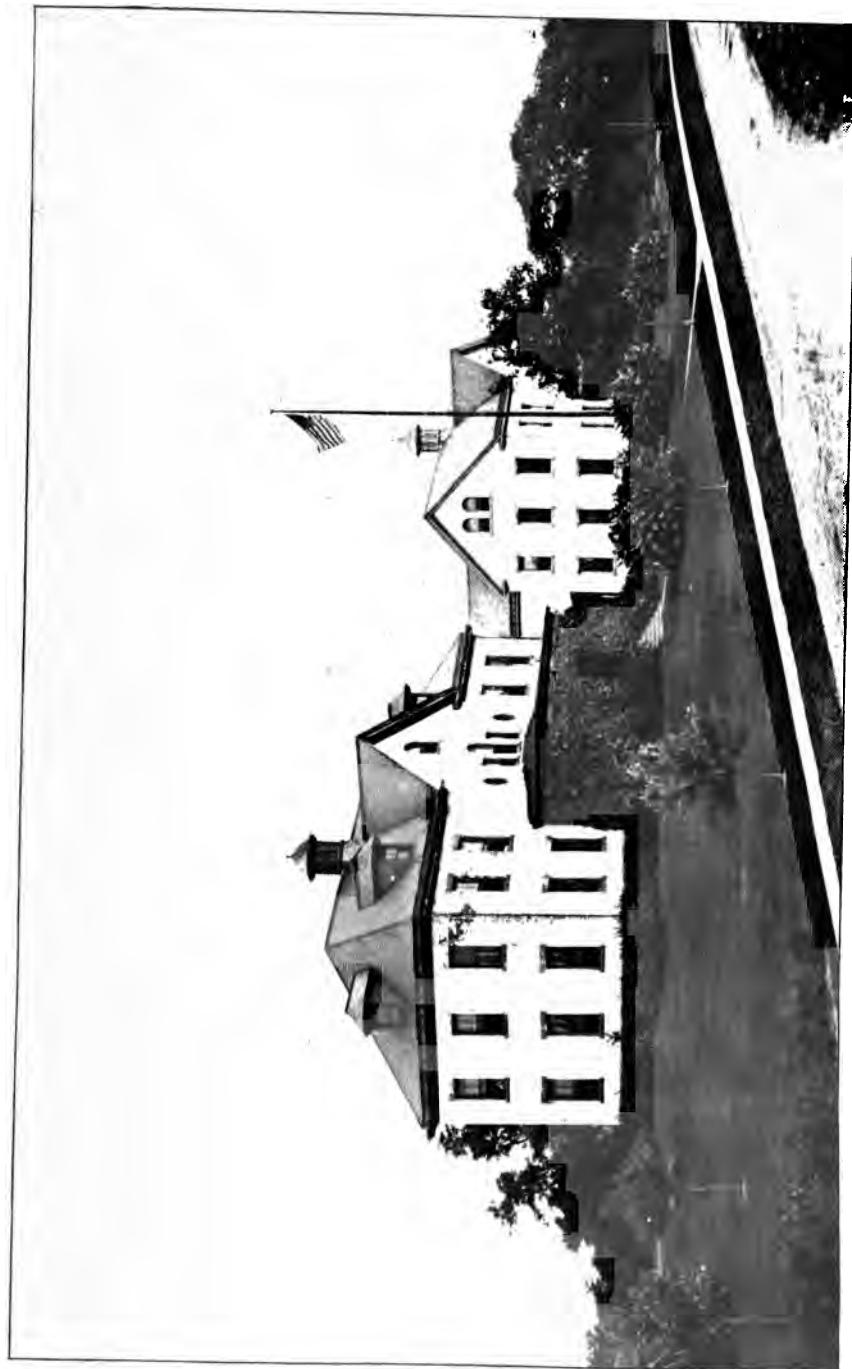
he resembles his brother Horatio both physically and mentally. He is egotistical to such an extent that he is the butt of jokes about town, and is so great a talker that he is considered more or less of a nuisance by those employing him as he hinders other workmen. He works irregularly at laboring and street cleaning, but is supported largely by his wife who is industrious and thrifty although inferior mentally. During the first part of his life he drank heavily. He has married or lived with various women. His first union was with Mary B. a 17-year old colored girl. By her he had one child. After her death he married or lived with an Alice J., and later with —— L., his present wife. He deserted and failed to support his only child.

Descendants.— V-5. Charlie C. is a dark skinned negro with low forehead and receding chin. He was neglected in his youth and has developed alcoholic and criminalistic habits. He was committed to a reformatory January 16, 1904, for grand larceny. While there he learned horseshoeing. No record was made of his mental condition, but his conduct was apparently good for he earned his parole March 11, 1905. He was next heard of on April 13, 1906, when he was committed to penitentiary for four years and six months on a charge of grand larceny. Reports to the effect that he has lived with various women have not been confirmed.

IV-9. Frances C., born in 1850, married Hiram P (real name D.). Her pictures show her to be a woman of fairly good appearance with no abnormality of features and good facial expression. She assisted in the support of her family on account of the shiftless alcoholic habits of her husband, and seems to have been a fair home maker. There is no criticism of her conduct. During the last five years of her life she was an invalid from rheumatism. During this period the family had public help, assistance from the visiting nurse and from the Charity Organization Society. Frances C. died May 29, 1914 of valvular heart disease and rheumatism.

Descendants.— IV-6. Chester P., employed as a packer in a glass factory. Below the average in intelligence. Said to have married well.

IV-7. Frank P., laborer, age 30, shiftless and feeble-minded and alcoholic strabismus. Unmarried.



FARM DORMITORY COTTAGES. THIRTY-SIX ADULT MALE COLONISTS RESIDE IN EACH.

IV-8. ———d inf of "boiles."

IV-10. Laura C. Married John H. She was moral and a fairly good homemaker. Further than this we know nothing of her mentality. Her marriage was the best of all those in her family, her husband being temperate and industrious, and owning a good livery business. She had rheumatism severely during the latter part of her life. She died at about 44 years of age. Cause of death is unknown. She left no descendants. Twin to IV-11.

IV-11. Lorin C., born about 1858, is of low mentality, shiftless and drinks some. Has lived in various places and has not accumulated property. Is usually employed as a farm laborer, or on lumbering jobs. At the time of investigation he was living in a most unfavorable environment where the land is poor and rocky and the timber has been cut off. He married May A., a first cousin once removed and a granddaughter of Thersey C., III-4. His wife is a woman of fair mentality for her class and in good health.

Descendants.—V-9. Verna B., 1890, married Tom G. Children Margaret B., 1909; Ernest B., 1910; Gertrude B., 1911; Dorothy B., 1912; Marion Louise P., 1915. V-10. Pearl B., 1893, married, a cripple, alcoholic, a shiftless man, had two children, Elsie B., 1911, and May B., 1913.

IV-1. Charlie C. Born about 1861, was according to descriptions, inferior mentality, alcoholic and wandered. He married Ella N., a woman of low mentality and sexually immoral and had by her three children. He deserted his family and went west with his brother Jean, going under the alias of Jim M. While living there he is said to have been involved in some trouble with a woman and is thought to have served time for bigamy. His wife and others state that he was habitually immoral like his brothers Horatio, George and Jean.

Descendants.—V-1. Laura, born 1888, married Chauncey F. Is rather inferior mentally and an improvident housekeeper. Home indicates shiftlessness. Children: Ida, born 1905. Is in poor health and under the care of Dr. B. Complains of pain in various parts of her body and soreness in the top of head. Mary, born 1908, had serious eye trouble, when two years of age. Was treated by Dr. Park L.

IV-12. Sadie C., married Tom K. According to photographs her appearance was fairly good. In mentality she is said to have resembled her sisters Laura and Frances. She is reported to have died of Bright's disease when about 45 years of age.

Descendants.—Lizzie K., married — B. She deserted her husband and four children and is thought to be living with another man. Her children Clyde B., 1911, Lucile, Mildren and Margaret were committed by the Society to protect children from cruelty and placed in a home. They were returned to their father in December, 1907, and have since that time been cared for by him.

V-12. Otis K., no information.

V-13. Ella K., dead.

V-14. Norma K., no information.

V-15. Flora K., no information.

V-16. Pearl K., no information.

IV-13. George C. is feeble-minded, alcoholic and shiftless. Is tall and well built, resembling his brother Horatio, except that he is cross-eyed. Works irregularly at farm laboring, wood cutting, etc., and changes places frequently. Is inclined to wander like his brothers, Jean and Charlie, and is accustomed to associate with dissolute women. Has lived off and on with Ella N. (Mrs. Z.), his brother Charlie's wife. Is so addicted to alcohol that the people for whom he works find it necessary to retain a part of his wages to buy him clothes. Works well under direction. No descendants.

IV-14. Rachael C., twin of the patient's father was born in 1856. When a young girl while working at service she met and married Aaron P., commonly known as "chum" P., an alcoholic man of Indian, negro and white blood. We have almost no information which would throw light on her mentality. Her habits were moral so far as could be ascertained. We are told that she had one "fit" as a girl, and her daughter reports that she had another when about 40 years of age. She was thin and nervous but according to her husband and daughter was not subject to headaches. She died when about 40 years of age of cancer of the uterus. The family was always poor on account of the father's alcoholic habits.

Descendants.—V-17. Harvey P., a mulatto, 36 years of age, is a periodical drinker. Is employed in an oil refinery.

V-18. Cora P., 34 years of age, is a mulatto with olive brown skin and wavy black hair. She is thin, nervous and subject to sick headaches which occur about every two weeks, is a shiftless, improvident housekeeper. She married George F., a mulatto of alcoholic habits, a first cousin on her father's side. Her children are:

VI-5. Roland, 17 years old, who is physically strong but inferior mentally. He was in the 6th grade when he left at 16 years of age.

VI-6. George, who is 15 is in the 5th grade.

VI-7. Lee, 10 years old, who is in the 3d grade and who has "fits" so badly that he never comes to and from school alone.

VI-8. Dillow is in poor health and in the 3d grade in school.

V-19. Harry P., a mulatto and a periodical drinker, works as a laborer. Has served a short sentence in the county jail for selling whiskey. Lives with a colored woman by whom he has one child.

VI-20. Floyd P., is a light skinned mulatto who drinks occasionally. Works as a jobber. Married Edith C., a mulatto and has five children.

VI-21. Asa is said to have died of heart disease and dropsy at 17 years of age. Had epilepsy and died in convulsions.

VI-22. Frank had epilepsy from 9 to 15 years of age when he died.

VI-23. Isabel, 18 years of age, married Stewart P. She is said to be in good health. Has one child, Lorina.

The Father's Father.

III-5. Erasmus C., is described as a man who was physically strong and usually in good health. He was an unskilled laborer, usually working by the day. So far as can be learned he was not intemperate, but had low standards of living and never got along. The blank admitting his daughter Louise to the State Hospital gives abuse on the part of the father as one of the supposed causes of the daughter's epilepsy and insanity. The record also states that the father was supposed to be insane, but thus far no information

has been received to confirm this. He died at about 65 years of age of bronchial trouble and other complications according to his son, Horatio.

Fraternity of Erasmus C. (Order of birth not known)

III-3. Byron C. Married Sarah —, and had two daughters, Rachel and Florence.

III-4. Thersey C. Married George E. and had one child Mary who married Ira A. Her daughter Ida married Lorin C., IV-II. Another daughter Florence married John H.

III-2. Steven C. Information can be obtained from Mrs. Keziah V.

III-1. Sarah C. Married Daniel S. Children, Amenda and Alzina. There was also a sister Ada and a sister Louise who went west, their married names are unknown.

II-1 and 2. The parents of Erasmus C. were Otic C and — S. Information may be obtained from Mrs. Mary G.

The Father's Mother.— III-6. Of Mary Elizabeth C. we have little definite information. She is described by one person who knew her as rather "innocent," and by another as "not over bright." The record admitting her daughter Louise to the State Hospital describes her as insane. She died March 20, 1875 at the age of 54 of tuberculosis.

III-7. Amanda C, sister of III-6 was feeble-minded, deaf and had a defect of speech. Her pictures look decidedly defective, her face was large and expressionless and she wore her hair short. We are informed by one person that she was subject to "fits."

II-3 and 4 are Otis C and Olive — parents of Mary Elizabeth, Curtis C. Otis C is said to have been a heavy drinker.

The Patient's Mother.— IV-16. Mary B. C. was born in 1867. She is able to read and write so that she can make herself understood, has a fairly good knowledge of her family, and of the places where she has lived or visited. Although of a higher type mentally than her husband, being more active, having a better memory and a greater interest in her surroundings, she is nevertheless defective, and is recognized as such in the community in which she lives. She is good natured, sociable and fond of her

family; is a ready talker, fond of news and has some sense of humor, but is indiscreet in conduct and inclined to be vulgar. She is so poor a worker that she cannot get laundry work to do and is seldom engaged to work by the day. In her own home she is a dirty and disorderly housekeeper. For a year or more she has worked about the town in which she lives selling extracts and has met with some success. Various accounts have been received of her lack of reserve and indiscreet conduct with men. It is thought she would be sexually immoral if it were not for the fact that she is so far below the average in the community socially. She is thought to have had immoral relations with a man named H, a husband of her aunt, and to have had one child by him. She claims to have had three "fits" between 12 and 14 years of age. The first attack she considers was brought on by eating camphor gum. She also claims that she had two convulsions while suffering from blood poisoning and fever following the birth of her fourth child. For sometime after this she says that she was troubled with a "jerking" of the leg. As a child she suffered with a running ear. She has been somewhat deaf all her life, but the deafness has been more pronounced during the last 15 years. She has always been subject to headaches and is somewhat nauseated; has suffered more or less from rheumatism for the last 25 years; wears glasses. In addition to her seven children born alive she claims to have had 11 miscarriages.

The Mother's Fraternity.—IV-17. Roselle B. Born in 1861 is clearly mentally defective. The cause of his condition as given by relatives is premature birth at seven months. In mental qualities he is said to resemble his father, although he is probably somewhat inferior to him. He has always been employed as a laborer and at odd jobs. By his wife Alma J, a feeble-minded woman, he had several children, two of whom survived infancy. He deserted his family and his wife and two children were sent to the Alms House in a starving condition. The wife died January 2, 1896 of tuberculosis.

Descendants.—V-31. Clara B, born in 1891 was admitted to the County Alms House with her mother and transferred to a State School for Feeble-minded Children, November 30, 1898.

She was transferred again to a custodial asylum August 21, 1905. A physical examination made in 1911 states that her height is five feet ten inches, her weight 155, eyes blue, hair brown. Her mentality is that of a child of seven years. She talks very little and is sluggish.

V-32. *John B.*, born August 6, 1889, is also feebleminded but of a higher grade than his sister. He was sent to a State school for feebleminded children November 24, 1896, and was returned to the alms house January 25, 1896. After remaining there for a month or two he was placed with a Mr. H. to work as a farm laborer. He was unable to take responsibility, was lazy and would crawl away in the hay-mow and go to sleep if not watched. After saving \$100 he went to B. where he remained until he had spent or lost all his money. When his last cent was spent, he met on the street a recruiting officer who bought him some breakfast and asked him if he would not like to join the United States Army. He replied that he would and was at once enlisted in the Ninth Company of the Marine Corps. His appearance is said to be good except for a large protruding lower jaw and a gaping mouth. He can write a fair letter and read a newspaper, but is decidedly lacking in judgment.

IV-18. *George B.*, died at about 40 years of age of apoplectic shock. According to his sister he dropped over while shaving and died the next day. We have no definite information in regard to his mental condition. No descendants.

The Mother's Father

III-16. *Willard B.* Was considered mentally defective. According to the physician who knew him all his life, he "had a flat spot in him" and was always more or less of a joke. He tried preaching but could not get anyone to listen to him. He also sold sewing machines and shifted about so much that his wife finally left him. He was probably a high grade defective as he seems to have passed for normal among strangers. He is said to have been markedly egotistical. His death which was due to shock occurred when he 77.

III-15. *Willie B.*, a twin brother of the mother's father is also said to have been defective. He was employed as a laborer,

SOME COTTAGES FOR MALE COLONISTS.



worked in a grist mill and a bake shop, and also at insurance. He entered the Masonic Home in October 21, 1907 and died there July 13, 1908 of cirrhosis of the liver. He is said to have attained a high degree of Masonry. The Superintendent of the Masonic Home says in a letter of March 5, 1915, "I do not recall that he had any peculiarities. He was of a very quiet nature however."

III-12. Julia B. Married Isaac W. She is said to be peculiar.

III-11. Andrew B., is said to have been normal. He was a farmer by occupation.

III-10. Lester B., a farmer by occupation was considered normal until 50 years of age, when he developed symptoms of insanity. He was committed to a State hospital in 1902, was discharged as improved, but was recommitted in 1907. The record at the hospital gives the following information about him: "His birth was not abnormal. He did not attend school regularly, had little desire for an education but can read and write. Has never married and is thought never to have associated with women. Was too stingy to live like other folks; would not provide himself with sufficient food or clothing; would not take a bath, shave or cut his hair. Used to drink hard cider but is not thought to have used it for seven or eight years before admission; chewed tobacco sparingly. At 50 years of age he showed signs of despondency, said a second tongue was growing in his mouth and could not swallow. Was bed-ridden for two years previous to commitment. Upon admission to the Hospital he was forced to eat, gained flesh and was discharged as cured in a few months. He returned home in the spring of 1903 and soon fell into his old habits, became bed-ridden, emaciated, etc. He would not eat, and would not allow any one to clean up his bed and room which was filthy. He was allowed to do as he wished by his old demented mother. Upon readmission his condition was found to be similar to that at the previous commitment. The patient had practiced vomiting until it had become a voluntary action. He was emotional and apprehensive; cried nearly all the time. He recognized the former doctors and caretakers, however, and was well oriented. His case was diagnosed as Involutional Melancholia." In February, 1915, he was still in a State Hospital.

III-8. Died in infancy.

III-13. Frances B., is normal mentally but at 60 years of age has been for many years an invalid from rheumatism. She married Orlando G., a successful farmer. She has two sons, Merton R. G., a lawyer of B., and R. Clifton G., a professor of Physics at a University. The latter is said to be a member of Phi Beta Kappa and Sigma Psi. A son Forest is a successful farmer.

III-14. Mary B. was formerly a teacher. At 73 years of age she is said to be in good health. She married Byron P.

II-9. Augusta B., father of the fraternity described was born in 1808. He was a farmer, carpenter and store-keeper, had charge of an aqueduct on the Genesee River Canal. Was a prosperous citizen of considerably more than average ability.

II-7. George B., a brother of Augustus was the inventor of a certain kind of paper and a planing machine.

II-6. John B. was a merchant.

II-5. Rufus B. was a lawyer, two sisters died young.

II-9. Betsey F., wife of Augustus B., mentioned above was demented during the latter part of her life. She died when about 90 years of age.

I-2. Mother of Betsey F., whose name is not known is said to have been insane.

Chronic Epilepsy

Many applicants after having had the symptoms of their disorder for a considerable period and having pursued various courses of treatment are finally admitted to the Colony expecting that some marvelous specific remedy may at once be administered so that the patient may be restored to perfect health within a very short space of time. Naturally such persons are more or less disappointed because no such outcome is possible. Too little consideration is given by persons arranging for the entering the Colony of applicants to the fact that where the disorder has been present for some time there is associated directly or indirectly a permanent structural change of the brain showing itself by perhaps a mental impairment or paralysis. When it is once realized that mental impairment, paralysis, convulsions, etc., often follow or go hand in hand with a destruction of essential parts of the brain, there will not then be expected the impossible in the way of treatment. Where there is but a disturbance of function of essential brain cells and no permanent damage to these most im-

portant tissues proper treatment may bring about a readjustment of the entire vital mechanism as it were and so cause a cessation of the symptoms of epilepsy.

The correction of errors of refraction; of abnormalities in the ear, nose and throat; of dental disorders; in a word, the placing of our patients in the best possible physical condition is carried out so far as our facilities permit.

A simple dietary, ample hours for recreation, a reasonable period for work, efforts to establish a spirit of co-operation, a hygienic life and a minimum of sedative medication are foundation stones of treatment of epilepsy. Surgical interference and drugs are used when symptoms demand, but not solely and indiscriminately because the patient is an epileptic.

Communicable and Other Diseases

A male patient who had been at the Colony some two years developed a well marked pellagra. Owing to the fact that this condition is so rare in this part of the country a brief abstract of the case is appended herewith:

J. J., aged 38 years, was admitted to the Craig Colony for Epileptics on April 27, 1913, from New York city, where he was born. His occupation was that of a butcher, and he stated that he had always lived in New York city, leaving there for the first time when he came to the Craig Colony. His father died at the age of 29 years. He was a matchmaker by occupation. Mother is living and well. Patient had measles, pertussis and scarlet fever during early life, and when 23 years of age, he received a blow on the head, following which he began to have Grand Mal seizures. Is said to have had infantile convulsions from the 5th to the 18th month of life, and then none until 23 years old. While at the Colony he averaged about two to three seizures a month. These were frequently followed by periods of ambulatory automatism and mental confusion. There also occurred periods of mental confusion independent of the seizures. He was rather dark-skinned, with receding forehead and thick lips. Showed numerous old scars and the remains of an acneform eruption. He showed no evidence of syphilis and a Wassermann was negative. At the time of admission to the Colony he showed

evidences of a pulmonary tuberculosis, and was cared for in the tubercular pavilion. Mentally, he passed the Binet-Simon test at a level of ten years.

Patient first noticed a brownish discoloration of the hands about the first part of June, 1915. This change was rather slight at first, but two or three weeks later, he noticed the same change taking place in the skin of the face and neck. This brownish discoloration became more marked, the skin of the hands assuming a leathery appearance and feel, and the skin of the face being a deep brown color and very rough. The lines of demarcation on the neck and forearms, between the normal and involved skin, were very distinct. The skin of the trunk and all other portions of the body same as the hands, wrists, face and neck showed no change whatever, being of normal feel and color. The skin of the hands soon began to show some cracking or fissuring, and peeling at these points.

The mucous membrane of the mouth was very much reddened and inflamed, and the tongue gave the appearance as though all the epithelial layer had been removed. A diarrhoea appeared with the onset of the skin lesions, and became very troublesome. Patient became very untidy, paying but little attention to his person. As stated above, he had a pulmonary tuberculosis, later showing signs of cavity formation in the left side. His mental failure was rapidly progressive, accompanied by extreme physical weakness. The mouth condition caused patient much discomfort, and he required constant care for some time prior to his death of September 4, 1915.

Unfortunately we were unable to obtain an autopsy.

This case of pellagra is of considerable interest owing to the fact that but few cases have been reported up to this time in this section of the country, the greater number of cases occurring in the Southern states. However, a few sporadic cases have been reported in New York State, the nearest one to SONYEA having been reported from Hornell, N. Y., some few years ago, and a few cases from New York City, e. g., at the Manhattan State Hospital, Ward's Island, New York City, there have been four cases of pellagra diagnosed up to this time. The disease is becoming a national problem, it being prevalent in all of the Southern states,

sporadic cases have been found in all of the states of the Union, save nine. According to the reports of the United States Public Health Service, pellagra has claimed not less than 30,000 victims, with a mortality rate in excess of 39 per cent. The causative factors of this disease have not been definitely proven as yet, but the dietetic theory which considers a use of spoiled maize or corn, as a causative factor, cannot be considered in our case.

Tuberculosis of an active type is seemingly less common than in former years. Large verandas should be erected on each Infirmary, these to be entirely open in the warm months and closed in part or wholly during the colder months.

During October, 1914, owing to the occurrence of several cases of typhoid fever, three doses of typhoid vaccine were administered to all patients at the Colony and to those employees desiring it. No new cases developed, thus clearing up the situation shortly. Since then all new admissions have received the vaccine.

The use of smallpox vaccine on all new admissions has been continued as in former years.

Several cases of chicken-pox occurred among the employees' children.

Some forty cases of pertussis and mumps occurred among the younger Colonists and employees' children, all making good recoveries as the disease was but moderately severe.

Five cases of scarlet fever occurred among children of married employees. Quarantine and the stopping of all general gatherings sufficed to prevent additional infections.

Diphtheria occurred among several boys, patients in the Tulip Tree Cottage. Antitoxin was used freely and all recovered.

Summary of Schick Reactions Covering a Period of 102 Days After the Administration of Diphtheria Anti-Toxin on 35 Patients

In February, 1915, a case of pharyngeal diphtheria occurred in our male children's service, soon followed by two other cases, one of which showed a nasal membrane in addition to the pharyngeal lesion. The diagnosis in all three cases was confirmed by bacteriological methods.

These three cases were promptly given from five to twelve thousand units of anti-toxin (furnished by the State Department of Health, Albany, N. Y.), and held in quarantine. All made uneventful recoveries, except the boy with nasal involvement, who ran a temperature of from 92°F. to 95°F and showed considerable prostration for a period of about 30 hours after the administration of 12,000 units of anti-toxin.

The remaining 32 boys were each given 500 units anti-toxin and were held in quarantine until each gave a negative culture on two successive days. None developed the disease. The ages of these boys (with 3 exceptions) ranged from 9 to 16 years of age.

A series of three Schick toxin reactions was performed, using the toxin freshly prepared by the State Hygienic Laboratory in Albany, 0.1 c.c. of the toxin preparation representing 1/50 M.L.D. These examinations were made on the 22d, 69th and 102d day after the administration of anti-toxin.

Results in the Three Clinical Cases

These three cases, which received 5,000, 6,000 and 12,000 units anti-toxin, all showed negative Schick reactions at the end of the twenty-second day period after administration of the anti-toxin. On the sixty-ninth day only the boy receiving the 12,000 units showed a negative Schick reaction indicating a residual immunity, while the other two, who had received about one-half as much anti-toxin showed an immunity which had faded somewhere between the twenty-second and sixty-ninth days, as indicated by positive Schick reactions. On the one hundred and second day the boy who had received the largest anti-toxin amount showed a fading immunity as indicated by a slightly positive toxin reaction while the remaining two cases showed lack of immunity by clearly positive Schick reactions.

Results in the 32 "Contacts"

These without clinical symptoms of diphtheria, gave twice negative throat cultures and were given 500 units of diphtheria anti-toxin as a prophylactic measure. At the end of the twenty-second day they all showed a positive passive immunity by negative Schick reactions. At the sixty-ninth day the immunity of 15 of



A PORTION OF VILLA FLORA GROUP FOR FEMALES.

this number had faded as evidenced by a positive toxin reaction. At the end of the one hundred and second day the reactions showed considerable change, a few shifting from a state of non-immunity to immunity without having received additional anti-toxin or without symptoms of the disease. On the one hundred and second day test seven of the 15 boys, who at the sixty-ninth day had showed a lack of immunity, again gave signs of immunity by a definitely negative toxin reaction. The remaining eight gave positive toxin reactions. The remaining 17 of the 32 cases gave negative reactions at this time (102 days after anti-toxin) thus showing that so small a dose of anti-toxin as 500 units was able to confer passive immunity for a space of time nearly equal to four months.

From the behavior of the toxin reaction as shown above among the non-clinical cases, we might infer that passive immunity has marked variation from none (as within the limits of the Schick test) to a decidedly positive state of immunity. The fact that among the three clinical cases, which were about equal in severity, the one who received the largest dose of anti-toxin showed immunity for a longer space of time than those with a lesser dose of anti-toxin might allow us to suspect that the dose of anti-toxin might bear a direct proportion to the duration in time of immunity.

Among one of the 17 boys who at the end of the one hundred and second day after the 500 unit dose showed an immunity by a negative toxin reaction there developed a clinical case of pharyngeal diphtheria confirmed by swab and culture on the one hundred and sixty-second day, thus showing that somewhere between the one hundred and second and one hundred and sixty-second days after immunization by 500 units of diphtheria anti-toxin his protection had faded and he developed the disease. The entire series will again be immunized and their reactions noted at similar periods to this first test.

Training School for Nurses

As referred to in previous reports, and elsewhere in this report, the Colony Hospital should be enlarged and the facilities therein so elaborated as to place the hospital on the highest possible plane

that present day methods of care and treatment demand. In order to encourage the best class of pupil nurses to enter the Colony service for training such a state of affairs is essential. Such equipment is in the last analysis of vital importance as it were in carrying out the purposes for which the Colony was established. With the hospital so arranged, reasonable hours of duty established, proper living quarters provided when off duty and adequate compensation granted, the Colony should be in a position to better meet the peculiar difficulties which present themselves in caring for epileptic patients. The nursing care afforded our patients has been improved by the progressive development of our Training School. Life in an isolated community, composed largely of those physically and mentally defective, and also subject to seizures of various kinds, must be made as attractive as possible in order to retain in the nursing service those persons found best suited for carrying on such work.

At the present day, with the majority of people seeking employment in urban communities rather than in rural districts, the question of securing nurses and attendants in our State Institutions is becoming an exceedingly difficult problem to solve. During each year a considerable number of attendants leave the service, thus resulting in an undue number of new attendants having to be trained to perform the duties incumbent upon their position. Our Training School has assisted very much in our efforts to retain satisfactory nurses and attendants.

The State says that most of its workers shall not be employed more than a certain number of hours each day, while in its institutions those persons directly concerned in the caring for patients must not only labor longer hours than do most other employees, but receive a smaller remuneration, both financially and so far as accommodations for the majority are concerned. The State demands that the private employer must protect his employees by providing against accident, etc., but seemingly fails to apply such measures to those in its own service. In order to better overcome many of the difficulties which present themselves as obstacles in carrying on of the proper care of the inmates of the Colony, it is mandatory that the Training School for Nurses be elaborated and developed so as to act as a powerful agent in overcoming and removing, in part at least, the obstacles before outlined.

The Nurses' Home, which has been requested so many times, for the Villa Flora Group, is an urgent necessity, primarily to provide suitable quarters for female nurses and attendants and secondarily to relieve the overcrowding in cottages for patients by utilizing present cottages temporarily used for housing the before mentioned employees.

All buildings for male patients have one or more female attendants or cooks on duty therein. The total number of nurses and attendants, while proportionately greater in some cottages than years ago, is still less than required for thorough work. Vacancies, vacations, leaves of absence, days off duty, illness, etc., are factors which deprive the Colony of the continuous service of the entire nursing force.

On September 13th there was graduated the first class to complete the course in the Training School since its registration. The program on this occasion was as follows:

Invocation.....	Resident Chaplain
	REV. W. B. McCARTHY
Music.....	Colony Orchestra
Address.....	President of Board of Managers
	MR. PERCY L. LANG
Music.....	Colony Orchestra
Presentation of Diplomas.....	Medical Superintendent
	DR. WILLIAM T. SHANAHAN
Music.....	Colony Orchestra
Benediction.....	Resident Chaplain
	REV. J. R. JEFFREY
Reception.	

The list of graduates is mentioned in the report of the Superintendent of Nurses.

Elopements

Considering the great amount of liberty allowed patients at the Colony, there being but two of the cottages, whose doors are locked and only one cottage with window guards, the number of those who leave the Colony without permission is not a large one.

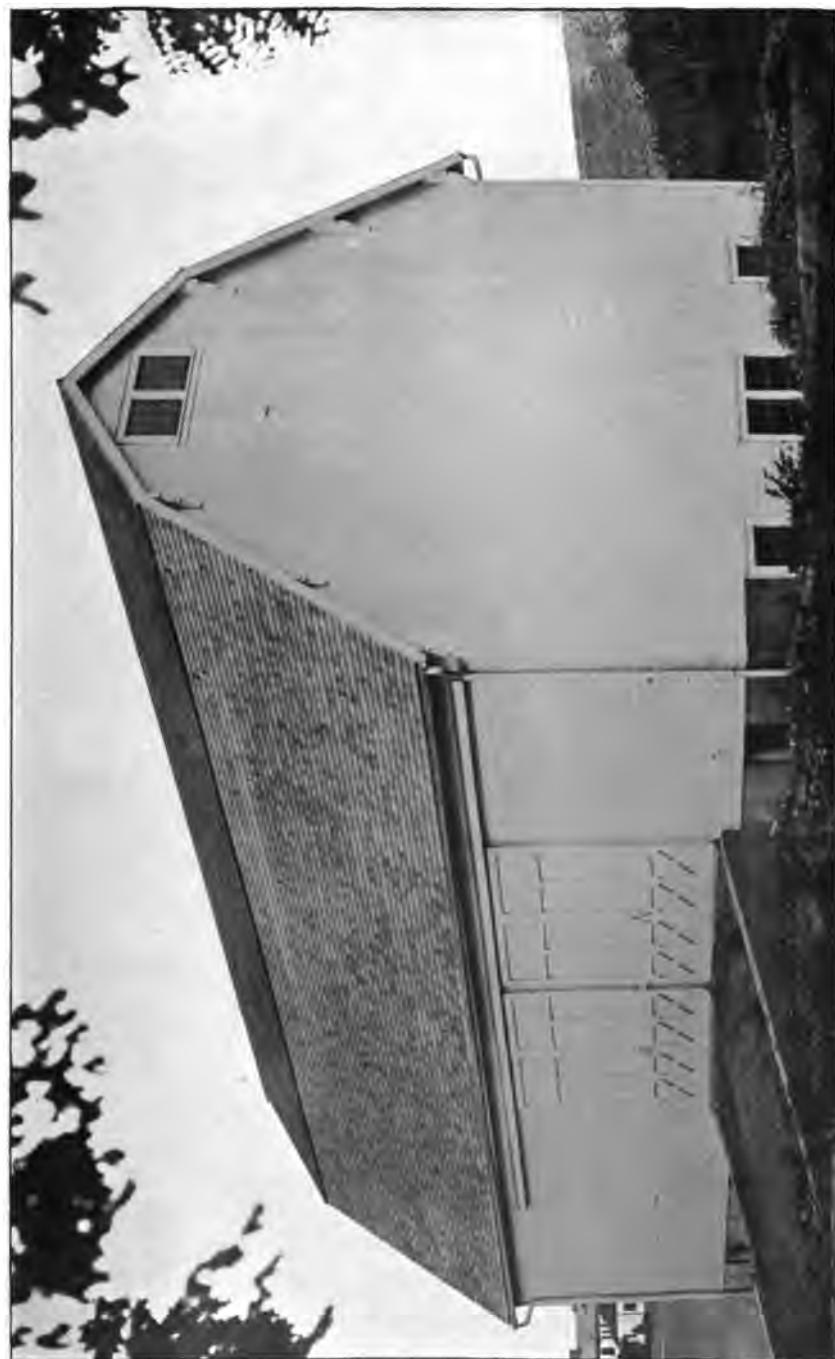
During the year several female patients wandered away and endeavored to leave, but all were found within a short distance from the Colony and returned. As result of either homesickness, discontentment of one kind or another, the wandering impulse seen in epileptics, false or misleading promises made by relatives or friends, lack of adaptation to Colony life, the placing of a city bred individual in a rural environment or what not, the following instances of male patients disregarding our rules by leaving the Colony without permission were recorded, some doing this repeatedly.

Eloped	64
Returned to the Colony.....	36
Arrived home, remaining there.....	22
Nothing heard from.....	3
Killed on train.....	1
Drowned	2

While the simple discipline required of Colonists is in the majority of instances conformed to, certain exceptions occur from time to time so that these few individuals cannot satisfactorily readjust themselves to their new environment. This failure to have proper readjustment occur, is as a rule, the effect of a mental abnormality. When a patient leaves the Colony without permission, and it is known that he is confused or mentally defective to such an extent not to permit his properly caring for himself, careful search is made within a reasonable distance from the Colony. If, however, the mentality of the patient is good and there is no reason to feel but what he is ordinarily well able to care for himself, his relatives are advised of his departure and requested should he reach home to return him to the Institution. The average duration of residence at the Colony of all patients thus far admitted to it has been nearly two years.

Care of Delinquent Epileptics

It was never intended in the original plan of the Colony to care for delinquent epileptics. During each year several applications are received for the admission of epileptics who have been incorrigible in their homes or in the community in which they reside,



NEW BARN AT WEST GROUP. THIS SHOULD BE THE NUCLEUS OF FARM GROUP IN THIS PORTION OF COLONY.

having perhaps made vicious assaults upon those about them, committed arson, been serious sex offenders, etc. It has been necessary to reject all of these applications as the Colony has no proper facilities for giving to such persons the close supervision which would be indicated. It certainly would be most injurious for self-evident reasons to the average patient at the Colony to consider domiciling these delinquents in the same building with them. The relation of these offending defectives to society is so important that some provision should be made at an early date so proper supervision might be given them.

Reimbursing Patients on September 30, 1915

There were 121 patients whose relatives reimbursed the State in part or in whole for their maintenance. It is still a question as to whether some of the relatives of the non-reimbursing patients might not reimburse in part, at least, if the Colony Treasurer and Agent was allowed to investigate in person into the communities where some of our patients resided, all investigations into financial standings of the relatives of patients being now carried on by correspondence.

Farm

The West House barn was completed during the year. Funds should be shortly made available so that the required sheds, silo, etc., might be erected in connection with this barn. On the foundation of the Old Six Nations Dormitory located near this new barn there should be erected a dormitory building of sufficient size to permit of the residing therein of not only male patients capable of doing farm work, but quarters for a married assistant farmer and other farm employees.

As mentioned in my report of last year, it would seem to me a wise investment on the part of the State, to erect at the Colony in convenient locations several barns of a simple but durable construction consisting of a roof with necessary supports, this roof to project sufficiently far so as to shed water, thus protecting the hay and grain stored therein. It should be possible to construct such a type of barn for a comparatively small amount of money. A suggestion is again made to request an appropriation sufficient

to erect at the south end of the Colony a farmstead group composed of a dormitory building for an assistant farmer, farm attendants and about twenty male patients, who would be employed on the tillable land in this portion of the Colony during the warmer months and during the winter would work in the extensive Colony woods carrying on progressive forestry, incidently furnishing wood for burning of brick and use in kitchens during the summer months and also cut some home product lumber. Barns, sheds, silo, etc., of sufficient capacity should also be erected adjacent to this dormitory.

Unfortunately for two years there has been no money available for carrying on the work of underdraining the Colony farm lands, which work is of the utmost importance in developing our agricultural interests. If, as mentioned elsewhere in the report, a small amount of money was appropriated for machinery there might be made in the brickyard agricultural tile for all Colony needs.

The proposed dredging by the Conservation Commission of that portion of the Kishaqua creek, north of the Dansville and Mt. Morris railroad bridge was owing to lack of funds, never started. For the same reason the placing of a dike on the east side of that stream was never accomplished. Something must be done shortly to protect the Colony land through which this portion of the Kishaqua creek flows.

On the night of May 26th, a severe frost did much damage to vegetation at the Colony, especially in the garden, all tomato plants, egg plants, etc., as well as small fruit being destroyed.

An extension to the horse barn in the main Farmstead Group as well as the providing of additional space for storage of tools, implements, etc., and space for storing vegetables is greatly needed. Many years ago the Colony had five barns, whereas at the present time it has but two.

Fires

On the night of December 10, 1914, the small log building used as a diningroom at the brickyard was burned, the cause of the fire being unknown. A new frame diningroom was at once built to take the place of the destroyed structure.

On the night of May 16th, there was a small fire on the second

floor of the Villa Flora building, the result of a poorly constructed fire place. Early discovery and prompt action prevented a great amount of damage being done.

Water Supply

As mentioned in the list of special appropriations desired, the entire question of an ample supply of water for the Colony should be given prompt attention. There should be available a duplicate pumping system and adequate storage facilities for not only ordinary purposes but also for fire protection. It is my opinion that careful consideration should be given to using the creek supply solely for all purposes. It is hoped that shortly funds will be available so that sanitary drinking fountains may be placed in all buildings at the Colony in which patients reside or work. At present, owing to the duplicate system of plumbing many hundred faucets supplying raw creek water are accessible to employees and patients for drinking. This creek water being contaminated is not a safe water for potable purposes.

While a new steam pump was placed in the Power House during the year for pumping of creek water, there should also be made available a duplicate pump for use, if, for any reason, this present pump was out of order.

A concrete retaining wall should be built on the west side of Kishaqua creek to protect both the Water Softening Plant and the Power Plant.

Construction

During the year work progressed on the water softening plant and the new power plant, so that both are practically finished. The final tests have not been made as yet to demonstrate that the water softening plant has all the capacity called for to meet the needs of the Colony. Funds should be made available very soon to install in the power plant a duplicate large generator and to enlarge the boiler rooms and install boilers, etc., therein, so as to arrange for a central heating plant.

Three of the four employees' cottages, work on which has been delayed for sometime are enclosed and the fourth will be under cover before the onset of cold weather.

The interior of the dairy barn has been remodeled, being now in a very satisfactory condition, except for painting. The sun

rooms connecting Hepatica and Iris and Nasturtium and Orchid cottages have been completed. Machinery for ironing and two tumbler driers, motor driven, are now being installed in the Colony laundry.

Cottages for Children

The urgent need of specially arranged cottages for younger colonists is more evident than ever before. Several small cottages, preferably one story in height with medium sized dormitories, ample bath and toilet rooms, verandas, etc., would meet the need long felt in classification. There are many children now in the infirmaries at the Colony, who should not be in those Peterson Hospital, Spratling Hall, etc., might reside.

Cottages for Female Working Patients

A building should be made available near Peterson Hospital, in which certain female patients assisting with house work in Peterson Hospital, Spratling Hall, etc., might reside.

Public Highway Through Colony Premises

Under existing laws, it was impossible to have the public highway passing through the Colony made a county highway in the same class of the two sections of improved highway which it connects. It is desired that the coming Legislature enact such a measure as will permit of the changing of this public highway from a town highway to a county highway. At present it is very much in need of repair, which matter the town of Groveland will attempt to care for temporarily later in the present calendar year.

No matter how great an effort may be expended in the matter of providing protection at the north subway there continues the menace to safety as the average automobile passes through the subway without materially reducing speed or blowing a signal, disregarding prominent signs stating that a dangerous road crossing exists at the subway. Some years ago an effort was made by the Colony to place a speed limit on automobiles using this public highway where it passes through the Colony but such effort was unsuccessful as an opinion from the Attorney-General stated that the Colony had no authority in the matter.



HEPATICA AND IRIS, TWO COTTAGES IN RIGHT FOREGROUND ARE AT PRESENT OCCUPIED BY FEMALE NURSES AND ATTENDANTS.
A NURSES' HOME IN THE VILLA FLORA GROUP WOULD MAKE THESE TWO COTTAGES AVAILABLE FOR FEMALE COLONISTS.

Kitchens

While the Colony plan calls for small units, a part of which would be a kitchen for each, nevertheless, without materially interfering with this system, the number of existing kitchens might be materially reduced, e. g., one general kitchen would suffice for the Village Green Group, one for the Farmstead Group and two general kitchens for a considerable portion of the Villa Flora Group, this being possible providing certain special buildings were erected for this purpose. The space now occupied by kitchens and dining rooms in the various cottages in the above mentioned groups could well be utilized as space for wards and sitting rooms, the latter being at present not available in either the Village Green or Farmstead Groups, it being necessary to utilize wards for both sitting and sleeping rooms for the best types of male colonists.

Patients' Clothing and Personal Belongings

In the open Colony system, or in fact in any institution, it is possible to care for but a reasonable number of articles belonging to patients. To minimize, so far as possible the difficulty encountered in this matter there was at a regular meeting of the Board of Managers held at the Craig Colony on January 12, 1915, a resolution passed declaring that hereafter all applicants for admission to the Colony shall be informed that the following articles, to be brought when a patient is admitted, are all that are required for their personal comfort. All articles are to be new or in a good state of repair and clean, if otherwise they cannot be received.

Male Patients

- 2 Suits, one light and one heavy.
- 3 Night shirts.
- 2 Pairs suspenders.
- 2 Pairs overalls and jumpers.
- 2 Pairs laced shoes.
- 12 Handkerchiefs.
- 6 Outside shirts.
- 3 Suits of summer underwear.
- 3 Suits of winter underwear.

- 1 Pair rubbers.
- 1 Pair mittens or heavy gloves.
- 1 Felt hat.
- 1 Straw hat.
- 1 Winter cap.
- 1 Overcoat.
- 1 Pair socks.
- 1 Pair slippers.
- 6 Collars.
- 3 Neckties.
- 1 Tooth brush.
- 1 Hair brush.
- 1 Box of plain stationery.

Female Patients

- 1 Long coat, medium weight, sufficiently large so as to wear a sweater underneath in cold weather.
- 1 Hat, not over trimmed.
- 1 Pair warm mittens.
- 1 Pair gloves.
- 2 Pairs laced shoes.
- 1 Pair rubbers.
- 1 Cloth dress, preferably in one piece.
- 1 Cloth skirt.
- 4 Wash dresses, preferably in one piece.
- 3 Wash waists.
- 1 Dark petticoat to wear with cloth skirt.
- 2 Colored gingham petticoats.
- 2 Outing flannel petticoats.
- 4 Suits of summer underwear.
- 4 Suits of winter underwear.
- 4 Night dresses.
- 1 Corset.
- 1 Pair garters.
- 6 Pairs stockings.
- 12 Handkerchiefs.
- 1 Bath robe or dressing gown.
- 1 Tooth brush.

- 1 Hair brush.
- 1 Coarse comb.
- 1 Fine comb.
- 1 Package of hair pins.
- 1 Box stationery.
- 1 Simple sewing bag containing one full paper needles as-sorted sizes; 1 paper pins; 2 spools black thread, 1 coarse and 1 fine; 2 spools white thread, 1 coarse and 1 fine; 1 spool of darning cotton; 1 pair blunt point scissors.

Pensions for Employees

The pension system for employees now in force in the State hospitals for the insane of this State should, in my opinion, be extended so as to include the employees of the various State charitable institutions, one of which is the Colony. This pension system has been in use for a sufficient period to show that on the whole it is quite satisfactory. The salaries and wages paid to officers and employees in the various State institutions should for like service be placed on a uniform basis. A discrimination in the matter of salaries and wages makes it exceedingly difficult for an institution with a lower rate, especially if located in a remote district, to retain, or in fact obtain, desirable employees.

Exhibits

Exhibits of work done by the patients in the various Colony departments including the schools, photographs of the Colony and various charts were sent to the State Conference of Charities and Correction held at Utica in November, 1914, and to the State Fair in Syracuse in September, 1915. An exhibit of Pathological specimens and a large heredity chart were sent to the annual meeting of the Medical Society of the State of New York at Buffalo, N. Y., in April, 1915.

Brickyard

As no appropriation was received from the Legislature in session in 1915 for the installation of additional machinery urgently required in the brickyard, it has been impossible to inaugurate the manufacture so long desired of the various clay and shale products, which could easily be turned out if a small amount of additional

equipment was made available. Four hundred thousand common brick were made during the summer just closed and will be burned this winter.

School

The Jeanette R. Hawkins School has proved quite satisfactory with the single exception that it does not furnish sufficient floor space to allow of all school work being done under the one roof. The construction of the east wing of the Jeanette R. Hawkins School would permit of our having a room for folk dancing, wand drill and gymnastics, as well as a domestic science room and rooms for scholastic instruction to the younger male Colonists.

The School gardens are larger and better than ever before and will next year cover a still larger area. The school children evince much interest in them. In addition to flowers the boys in their garden raised the following on a plot 40 feet by 40 feet:

Cauliflower	20 heads
Cabbage	11 heads
Beans (string)	18 quarts
Lettuce	10 doz. heads
Potatoes, 240 sq. feet	2 bushels
Tomatoes, ripe	½ bushel
Tomatoes, green	2 bushels
Seed beans	2 quarts

Medical Staff

There were no changes in the medical staff during the year. Arrangements have been completed so that shortly it will be possible to have selected members of the Colony staff, from time to time, take a special course in the Psychiatric Institute in New York city. The close association between insanity, epilepsy and feeble-mindedness necessitates, if progressive work is to be accomplished, a broad training on the part of physicians, who are working with these classes.

In order to preserve medical records, which are progressively collecting by the Colony, it is hoped that in the not distant future ample fireproof filing space may be available in which such records may be properly preserved.

Drs. Arthur G. Bennett and Clayton M. Brown of Buffalo, N. Y., visiting Ophthalmologist and Rhinologist respectively, visited the Colony regularly during the year.

Medical Meetings

The Livingston County Medical Society held its regular meeting at the Colony on May 4, 1915. Two excellent papers were presented by Drs. C. M. Brown and Thew Wright of Buffalo, N. Y. During the year the regular staff meetings were conducted thrice weekly.

Donations for Year Beginning October 1, 1914

Burke, Fitzsimons, Hone & Co., per Mr. Daniel B. Murphy, Rochester, N. Y., six sweaters and 20 mufflers.

Mr. D. M. Garson, Main and South avenue, Rochester, N. Y., 25 ties.

Mrs. J. J. Rouse, Dansville, N. Y., box of caps.

John J. White, New York city, money.

Mrs. Mettzer, 161 Henry street, New York city, barrel of herring.

Mr. and Mrs. C. W. Bingham, Mt. Morris, N. Y., magazines and books.

Mr. George Crasper, 6 Harrison street, New York city, one tennis net and two tennis rackets.

PATHOLOGIST'S REPORT

October 1, 1915.

DR. WILLIAM T. SHANAHAN, Medical Superintendent:

SIR.—I have the honor to submit herewith my report for the year ending September 30, 1915. During the first half of the fiscal year the writer was absent from the Colony and the work of the laboratory was most ably and satisfactorily carried on by Dr. A. L. Shaw, to whom my thanks are due for his cooperation.

The work of the year is shown in the following table:

Urinies	403
Throat cultures	687
Widal tests	234
Blood counts	5
Sputums	3
Blood pressures	401
Cerebro-spinal fluids	8
Luetin tests	99
Autopsies	68
Wassermann reactions	776
Photographic work	1,750
Schick tests	144
Water alkalinity	43
	—
	4,621

The autopsies were classified as follows:

Permission of Law 1914, Chapter 40	4
Coroner's order	12
Permission	8
Permission Chapter 485, Law 1905	36
Law and permission	8
	—
	68
Complete	32
Brain only	36
	—
	68

Abstracts of these autopsies are appended.

Wassermann Tests

The Wassermann test has been done on practically all the males of the Colony and the results of all the work to date, which includes a few females examined from time to time, is shown below.

Negative tests	864
Positive tests	22
	886 2.48%

This percentage is lower than we expected but is possibly higher than the final result will be for the reason that these figures include most of the suspicious cases, in which of course the number of positives is greater than in the run of cases. It is evident that syphilis plays an unimportant role in epilepsy as a whole and it also seems likely that syphilis is more often associated with epilepsy than the cause of it. Anti-syphilitic treatment has little effect on the epilepsy as a rule.

Luetin Tests

A few leutin tests have been done on the younger male patients with a greater number of positive results than from the Wassermann reaction. Again the group tested includes many suspects, so that the per cent of positives is probably higher. Nineteen of 99 cases showed pustular reactions and were reported positive.

Water Softening Plant

The work of determining the correct dosage of chemicals was turned over to the Laboratory through the lack of assistance from the supervising departments at Albany. The plant will soften a certain amount of water, namely, about 85,000 gallons per day, fairly well as regards temporary hardness:

Alkalinity, raw spring water, about 250 parts per million.
Alkalinity, treated spring water, about 25 to 50 per million.

Many defects are present in the plant which were reported to you earlier in the year. Since that time we have found that the above results can be obtained without the use of soda ash and with less lime added. It seems probable that the soda ash was used up by some of the lime added, rather than by the lime and magnesia causing permanent hardness. This matter is still under experiment.

Improvements

Certain new apparatus has been added and a dark room for photographic work is now in course of construction.

Needs

The great need of the Laboratory is a small hospital ward for about 10 patients, in which experimental work could be carried out under conditions entirely controlled by the Laboratory force. This is absolutely needed for research into the causes of the disease. In addition, a new autopsy room should be added as the present one is unsanitary and ill-lighted.

Attendance at Autopsies

	Present	Absent	No notice
Dr. Shanahan	53	14	1
Dr. Collier	47	19	2
Dr. Trader	25	41	2
Dr. Haggerty	41	26	1
Dr. Doolittle	34	32	2
Dr. Van Buren	49	17	2
Dr. Fischbein	53	13	2
Dr. Shaw	55	13	....
Dr. Thomson	46	19	3
Dr. Munson	29	....	....

The Laboratory workers desire to thank you for your co-operation in their efforts.

Respectfully,

J. F. MUNSON, M. D.,
Resident Pathologist.

Abstracts of Autopsies for the Fiscal Year Ending September 30, 1915

No. 596. A. G. 3480. Male, white, single, aged at death 36. Father died of rheumatic heart disease, mother of chronic nephritis. Maternal grandmother died of asthma, grandfather of "brain-stroke," father's mother died of paralysis.

Onset of epilepsy at 9 months, without assigned cause. Patient was deficient mentally and had such frequent seizures that little

schooling could be had. Attacks were both mild and severe with automatism after the latter.

Previous to admission, two and a half years before death, his general health was impaired; he had many stigmata and was dull and stupid, an imbecile. During Colony residence, he had six to twelve seizures per month, and lived an uneventful vegetative existence. He contracted typhoid fever and died from perforation.

The brain weighed 1,000 grams, was moist, congested and negative, except for granular choroids, and Pacchionian bodies. Pulmonary congestion. Intima of aortic ring much thickened. Abdomen distended and contained free intestinal contents, coming from a perforated typhoid ulcer near the ileo-caecal valve; remainder of the ileum involved in an ulcerative process. Spleen and mesenteric glands enlarged. Kidneys showed fatty change.

No. 597. S. J. C. 4078. Male, white, single, aged at death 62. Family history negative as known. Up to the age of 50 he was an alcoholic and given to venery. Had gonorrhea at 45, and at 59, had his first seizure accompanied by a paralysis lasting three weeks. Seizures were severe. On admission, six days before his death he was feeble, presenile, with apparently great cardio-vascular changes and an organic heart lesion. Mentality fair, with some dementia. Hearing greatly impaired. Locomotion and equilibrium poor. While in the observation ward, he was found unconscious and died from cerebral hemorrhage.

The brain showed cloudy arachnoid and pale cortex; edema of the cerebral hemispheres. Great intimal and medial change of vertebral and posterior cerebral arteries. The right side of the pons was bulging, due to a hemorrhage the size of a hen's egg. The heart was cor bovinum, weighing empty 640 grains. Mitral and aortic valves incompetent. General arterio-sclerosis. Left kidney represented by only a few grams of renal tissue. Right kidney showed chronic change. Old urinary fistula opening into scrotum.

No. 598. F. H. 2349. Single, white, male, aged 53 years at death. Family history unknown. During childhood, he suffered from scarlet fever, followed by a left hemiplegia, but on admission to the Colony seven years before death, he showed little motor failure. During adult life, he was alcoholic. First seizure

at 42 years. Considered as due to a cerebropathy arising during scarlet fever, with alcoholism and a debauched life as exciting causes. Initial mental examination showed him primarily defective. Death followed a long illness, marked by vascular changes and extreme icterus; possibly a malignant chole-cystitis, with pulmonary tuberculosis.

Autopsy showed a jaundiced scalp, periosteum and dura. Arachnoid cloudy. Marked right hemi-atrophy with diffuse sclerosis, right temporal region also affected. Microgyria and hardening in right frontal region. Anterior horn of right ventricle greatly dilated. Brain moist and weighed 1,070 grams.

No. 599. G. W. 3579. Single, white, female, aged at death 15 years. Father apparently well and normal mentally, but the mother was insane for two years prior to this patient's admission to the Colony and gave a history of "queerness" dating back some twenty years. Patient's epilepsy began during dentition. Upon admission to the Colony, two years prior to her death, she presented as an irritable stubborn imbecile in good general health, rather overdeveloped for her age. She had frequent and severe seizures and died of an intercurrent lobar pneumonia.

The autopsy showed a soft brain, unusually moist and congested, weighing 1,115 grams.

No. 600, C. H. 2948. White, male, single, aged at death 60 years. The patient on admission five years before his death, presented as a dwarf-like imbecile, with many physical stigmata; old keratitis in one eye; extreme degree genu valgum, interfering with locomotion. He was irritable, extremely ignorant and possessed little or no knowledge of his family or past life. Was an inmate of a county house for years. During his Colony residence he did some work about the ward, had very few seizures and finally died of typhoid fever during an epidemic.

The autopsy showed old pacchymeningitis hemorrhagica interna over both occipital lobes with diffuse leptomeningitis over entire convexity. Brain oedematous and congested. Both lateral ventricles large, with cystic choroids. Cortex showed a tendency to macrogryria throughout. Weight, 1,735 grams.

No. 601. L. J. 2767. Single, white, female, aged at death about 21 years. Her mother and grandmother were "nervous," a brother was feeble-minded, and an aunt epileptic.

Upon admission some 5½ years prior to her death, she gave a history of having had seizures since birth or early infancy. She was undersized and only fairly well nourished; showed some apical signs in both lungs, poor peripheral circulation, gastric indigestion with gluttony, and choreiform movements of the upper extremities. Mentally she was rated as low grade feeble-minded. During her Colony residence, she had frequent seizures, demented to a low grade imbecility, became bed-ridden from frequent attacks and finally died of typhoid fever during an epidemic.

No. 602. E. S. 3036. Single, white, female, aged at death 21 years. Last in line of birth of 10 children, one of whom had a seizure. Epilepsy began at 10 years. Admitted to the Colony about four years before death. She was in good health and of fair mentality. Frequent mental disturbances, later followed by dementia which progressed to a low grade, paralleled by physical failure. Died of typhoid fever.

Autopsy showed a pale edematous brain, with thickened leptomeninges. Weight 1155 grams. Adhesions and atelectasis of both lungs. Localized fatty change in liver. Spleen enlarged. Typhoid ulcers in intestine, with involvement of all sympathetic structures. Colon contained clots.

No. 603. B. H. 158. Single, white, male, aged at death 31 years. Mother epileptic during her youth. Patient had a large head at birth with onset of epilepsy during first year. A resident of the Colony 18 years. Fair general health, dull mentally but a good worker. Found dead.

Autopsy showed a cloudy pia-arachnoid, brain soft with congestion and edema, weight 1695 grams. Congestion and edema of lungs. Right side of heart dilated. Aortic valve incompetent. Liver large and fatty. Kidneys had thin cortex and were congested.

No. 604. G. W. 2468. Single, white, female, aged at death 25 years. Meningitis at the age of 4. Epilepsy began at 12. On admission six years before her death, she was in fair physical health, of low mental status. Frequent serial attacks were followed by exhaustion and death.

Brain showed old meningitis with thickening of the dura in the frontal region. Brain soft, congested and oedematous. Weight, 985 grams.

No. 605. J. K. 3665. Single, white, male, aged at death about 24 years. Family and personal history unknown. Admitted about two years before his death, he presented as an imbecile in fair general health. He had a few severe attacks every month and deteriorated mentally. Death followed a long illness which may have been typhoid or tuberculosis, terminating with broncho-pneumonia.

The brain showed only clouded meninges and congestion and edema. Weight 1360 grams.

No. 606. N. T. 2796. Single, white, female, aged at death 20 years. Father alcoholic and migrainous, maternal grandmother epileptic, insane, apoplectic and died of brain softening. Epilepsy began during difficult dentition. During five years residence at the Colony, she enjoyed fair health, had frequent seizures, and failed mentally. Death due to typhoid fever.

Brain negative save for clouded arachnoid, and injection of the pial vessels. Weight 1180 grams.

No. 607. K. C. 3108. White, female, child, aged at death 13 years. Mother tubercular. Paternal uncle epileptic, due to an encephalitis following scarlet fever. Patient's seizures began at 6 years and were preceded by an epigastric aura and false sight. Admitted four years prior to her death, she was in excellent health but was rated as a moral imbecile. She gradually demented and died of typhoid fever and broncho-pneumonia.

There was deep injection of the hind-brain with a cyst of the pineal the size of a marble. Brain weight 1290 grams. Old pleurisy of right lung with pneumonia, left-lung showed acute pleurisy with broncho-pneumonia. Intestine showed typhoid ulcers.

No. 608. A. S. 3421. Single, white, female, aged at death 30 years. She was a congenital imbecile. Onset of epilepsy unknown but after the age of 11. On admission here, three years before her death, she was in fair general health but later suffered prostration after series, developed a tuberculosis, with a terminal pneumonia.

Brain autopsy showed an albuminous exudate under the pia arachnoid, slight right hemi-trophy, convolutions of frontal regions

vermiform. Brain soft, moist with great cortical injection. Weight 835 grams.

No. 609. H. C. 2703. Single, white, male, aged at death 30 years. Mother insane, a drug habitue. Patient born after severe instrumentation; recognized as frank defective at three years. Epilepsy began at 16 years. Transferred to the Colony six years before death, in fair general health, an imbecile. Seizures frequent. Death resulted from exhaustion following a series.

Brain showed congestion and oedema. Weight 1,375 grams.

No. 610. L. K. 1276. Single, white, male, aged at death 37 years. Paternal aunt nervous, irritable, with outbursts of temper. Father alcoholic in early life. Patient born after a long labor due to mal-position. Was feeble, puny, and had spasms in infancy. Left side paralysis at the age of 16 years. During 12 years of Colony residence, he showed progressive mental deterioration with partial diplegia, poor equilibrium, propulsive gait, macrocephalus, and died after a long debilitated state.

Autopsy showed pyriform skull. Convolutions flattened and pale. Fluctuation of cortex in situ. Brain collapsed on removal. Section showed tremendous dilatation with distortion of the basal ganglia and thickening of the cortex in the frontal region. Weight 1325 grams. Double broncho-pneumonia, with purulent pleurisy. Acute renal change. Ileo-colitis without ulceration.

No. 611. A. M. K. 1400. Single, white, female, aged at death 27 years. Born after a severe labor. Spasms at 18 months and severe attack at 13 years. Admitted at the age of 16 years. Head large, some stigmata. She gradually failed both mentally and physically, developed an anaemia and died following a severe seizure.

Autopsy showed brain without gross changes. Weight 1370 grams. Heart dilated. Lungs congested and oedematous. Kidneys showed narrowing of the cortex and chronic change.

No. 612. R. W. 2927. Single, white, male, aged at death 63 years. Mother migrainous and father alcoholic. Epilepsy began at 53. On admission he had a beginning atheroma, urine contained albumin, gait characterized by dragging of feet, exaggerated knee jerks and clonus, right sided dilatation of heart. Patient failed physically and died from circulatory failure.

Autopsy showed cerebral anemia with a small osteoma in the Sylvian fissure. Weight 1,370 grams.

No. 613. H. H. 3133. A married female, aged at death 27 years. Mother of one child, deceased. Epilepsy began at 12. Admitted to the Colony at age of 23. Initial examination and Colony residence uneventful. Died of typhoid fever and pneumonia.

Brain showed no gross changes. Weight 1170 grams.

No. 614. A. S. 92. White, single, male, aged at death 44 years. Epilepsy began at 2 years, with a remission till 13 years, when he sustained a blow on the head. Old trephine opening over right motor region. On admission 18 years before death, he showed nothing beyond feeble-mindedness. Recovered case of pulmonary tuberculosis. Found dead with evidences of seizures.

Adherent dura and old cortical laceration under trephine opening. Weight 1410 grams. No tuberculosis. Other findings were those associated with death after seizure.

No. 615. O. S. 3474. White, male, single, aged at death 16 years. Family history contained several cases of epilepsy. Patient said to have had paralysis of right arm immediately after birth. Teething accompanied by a convulsion. Epilepsy began at six weeks; right side most affected. Patient an imbecile, restless and destructive and with a tendency to homicide. Speech monotonous and indistinct. Admitted at the age of 13 years, he was mentally at the four year level, left handed, and had enlarged tonsils and adenoids. He suffered from serial seizures at the Colony and died from such an attack.

Skull asymmetrical and spongy portion increased in thickness. Pachymeningitis interna hemorrhagica. There were extensive patches of sclerosis and atrophy throughout the brain and nodules in the walls of the moderately dilated ventricles. Brain weight 1335 grams.

No. 616. M. S. 2759. Female, single, aged at death 55 years. Family and personal history practically unknown. Had been an epileptic since the age of 35, the assigned cause being cerebral hemorrhage. Physical examination on admission showed a slight left-sided paralysis, possible double ptosis. Urine contained reducing sugar. Showed no lung signs on admission but

these developed later in connection with a bronchitis. She gradually failed and died from pulmonary edema.

The brain was small and the right side was much smaller than the left, with sclerosis and some microgyria. The base of the skull was asymmetrical, the right middle fossa being much smaller than the left. Brain weight, 800 grams.

No. 617. G. K. A. 4008. Male, married, age at death 47 years. The patient's father was sometime an alcoholic. The patient's right leg weak when learning to walk; made slow progress in school. Patient has eight children. Onset of epilepsy at the age of 38 years. Right side of the body was first and most often affected. Initial physical examination showed a man of senile appearance, a mitral regurgitant murmur, the reflexes are all exaggerated and an ankle clonus on both sides; right testicle is hypertrophied; marked dorsal kyphosis. Mentally he is deficient and cannot read or write.

On one occasion at the Colony, following a seizure the patient was greatly exhausted, with signs of cardiac-weakness. On another occasion, after two seizures he was much prostrated and exhausted; pulmonary edema developed. All reflexes were exaggerated, the temperature was elevated; pupils equal; heart action very weak. Died with a temperature of 107.4° per rectum. The diagnosis was cerebral hemorrhage.

The autopsy showed a tremendous left sided ventricular hemorrhage; localized atrophy on the right side and small porencephaly in left parietal region. Weight: 1245 grams. Heart hypertrophied; mitral incompetent. Lungs congested and edematous. Chronic contracted kidneys.

No. 618. M. E. J. 2508. White, female, aged at death 57 years. Father alcoholic and died of hemorrhage. One brother insane for a time and one grandmother had severe headaches. Patient was a puny child. Suffered from prolonged headaches till a few years before her admission to the Colony. Initial examination negative; patient was feeble-minded. Epilepsy began at 27. Clinical history mentions a left sided status of three hours duration, with recovery. Finally, her condition being poor and having many seizures, she was placed in bed with temperature

subnormal, labored and irregular breathing. She failed and died after several days.

The brain showed marked arterio-sclerosis. Left choroid cystic, the right granular. There was a small purulent collection in the pars anterior of the pituitary. Brain weight, 1230 grams.

No. 619. C. McK. 2559. Single, white, female, aged at death 65 years. Two sisters insane and one had "spells", personal history negative. The patient had been at a State Hospital for observation. Her epilepsy began at 7. Her initial examination showed moderate arterio-sclerosis, casts in the urine; a double Babinski with exaggeration of all reflexes. She was a feeble-minded dement.

Colony life negative. The terminal event was a brain lesion, initiated by vomiting, deviation of the tongue to the left, and dilatation of the left pupil; the left corner of the mouth was drawn down. Left sided Babinski, both legs were edematous, and paralysis of the right side and of speech appeared.

Autopsy showed a thick skull, lessening the cranial capacity; purulent meningitis over frontal lobes, right temporal lobe was sclerotic and atrophic. Brain weight 915 grams. Mitral valve incompetent with marked aortic change; chronic parenchymatous nephritis.

No. 620. C. McG. 3258. Single, white, female, aged at death 40. Family history negative except for a remote case of traumatic epilepsy and for tuberculosis. Personal history negative; epilepsy began at the age of 12 years. Initial examination negative and she only reached the 7 year mental grade.

At the Colony she had a good many attacks and sustained a few minor injuries. The terminal event was an intractable diarrhoea, probably a tubercular enteritis. The autopsy showed a hard sclerotic-like brain with some left temporal atrophy. Weight, 1,305 grams.

No. 621. M. A. 3652. White, female, child, aged at death 13. Mother nervous and emotional. During teething, the patient fell from a table and had a convulsion. Severe attack of scarlet fever at 5. Onset of her epilepsy at nine years. Initial examination negative except for signs at the pulmonary apices and roughening of the sounds over the pulmonary valve. She was 5

years old mentally. At the Colony she was mischievous and unruly; made some progress in school. The terminal event was a series of seizures followed by exhaustion and pulmonary edema.

Brain autopsy showed no gross changes beyond cerebral congestion and edema. Weight, 1330 grams.

No. 622. E. P. 2832. Female, child, aged at death 14 years. Both parents alcoholic and a paternal cousin epileptic. Patient born at tedious labor. Epilepsy began at two years of age and at nine she showed weakness of the right hand. Physical examination showed a right hemiplegic with right Babinski. She was an imbecile.

Autopsy showed old pachymeningitis, microgyria and thinning of the cortex, in the left parietal region. The cortex is in places sclerotic and on the left fluctuates, due to an enlarged left ventricle. Left hemiatrophy and left temporal atrophy. Weight, 1060 grams.

No. 623. C. E. D. 4010. White, female, single, at death 47. The family history was negative. Personal history negative, except for the onset of epilepsy at 17. Initial examination showed a fat imbecile, with facial hirsutes and eyes of Mongolian type. Clinical history negative. Death was due to ileo-colitis and cardiac degeneration.

The autopsy showed fatty degeneration of the heart, old renal change and ileo-colitis. The brain was small weighing 745 grams.

No. 624. H. McK. 3684. Male, single, aged at death 36. Family history negative. He was a large baby and was born at a rapid labor. Personal history negative. Onset of epilepsy at 18. Right arm is said to be first affected but the only positive physical finding was a right Babinski. Clinical history negative except that he appeared to be a carrier of diphtheria bacilli. The terminal event was a sudden lobar pneumonia with cardiac failure.

Autopsy showed some pachymeningitis and cysts of the subarachnoid over both occipitals. Brain very firm. Pineal gland enlarged to the size of a hickory nut. Weight of brain 1490 grams.

No. 625. J. D. 3155. Male, single, aged at death 49. Paternal cousin was epileptic. Patient's left eye injured at the age

of 5, destroying sight. He was in a State hospital for a time suffering from an undifferentiated depression. He lost the sight of the right eye (at about 18 years of age) due to sympathetic inflammation. His epilepsy began at 39, shortly after the enucleation of his left eye. Initial physical examination showed a cataract in the right eye and signs of pulmonary tuberculosis; dementia. He once attempted suicide. A sudden prostration with vomiting of "coffee-ground" matter terminated uneventfully. He failed and died following two seizures.

Autopsy showed atrophy of the optic nerves and cortex and also right temporal atrophy, with sclerosis. Brain weight, 1230 grams.

No. 626. E. J. K. 2102. Widowed, white, female, aged at death 53. Family history negative except for tuberculosis, and apoplexy. She was married and a child is living and well. Epilepsy began at the age of 36. The initial examination was negative except for scars said to be of scrofulous origin. At the Colony she had a chronic tubercular process and died of superimposed acute pneumonia. Brain negative. Weight, 1260 grams.

No. 627. W. McD. 618. Male, white, single, aged at death 32. Maternal uncle is insane. First seizure occurred at the age of one year, with an interval of several years before the next convulsion. This patient was a low grade imbecile. His Colony residence was uneventful, except for attacks of jaundice. He developed pulmonary tuberculosis, but his death was due to a seizure.

Brain negative. Weight, 1380 grams. Old tuberculosis of the right apex; adhesions about the gall-bladder. Otherwise, the appearances were those of seizure death.

No. 628. E. V. 1883. Female, single, aged at death 33. One brother died of fits and another of spinal cord disease. The patient sustained a fall at the age of 2 years, followed by meningitis. The first seizure occurred several months afterward. The right side was said to be most involved in attacks. Initial examination negative. There appeared to be a relation between menstruation and the occurrence of a seizure. She had occasional periods of mental disturbance. Death was due to a seizure.

The brain showed an old lepto-meningitis with right atrophy.

Marked edema of the brain substance. Weight, 1330 grams. Lower lobe of right lung edematous. General appearances those of seizure death.

No. 629. J. W. 2677. Male, single, aged at death 31. Family history unknown, except for alcoholism in father. Personal history unknown. Physical examination negative. He was feeble-minded but could read and write a little and use sign language. Clinical history uneventful; the terminal event was several seizures followed by acute pulmonary edema.

The brain was negative, weighing 1210 grams.

No. 630. C. M. White, male, aged at death 30 years. Family and personal history negative, except that the father possibly abused the patient. Epilepsy began at 19½. Initial examination showed the scar of an old trephine opening; the pupils react slowly to light and accommodation. There is also a scar in the appendix region probably appendicostomy (therapeutic). He had frequent mental disturbances and attempted suicide. He was mentally deficient and was considered insane. He suffered from several attacks of status and serial seizures and died from pneumonia.

The autopsy showed a perfectly healed trephine opening in the right lower parietal region, the button being replaced. Underneath there was old inflammation and softening of the cortex. There was an osteoma of the falk. Brain very moist, weight, 1445 grams. Broncho pneumonia.

No. 631. C. R. 4033. Single, female, aged at death 58. Family history negative. Personal history negative except for severe whooping cough at the age of ten. Preceding the first attack at 13, she frequently suffered from bilious colic and an attack of this preceded the first seizure. Physical examination negative except for a doubtful Babinski on both sides. She was a dement.

Clinical notes negative except for a fractured tibia. The terminal event was a febrile condition followed by enlargements of both parotid glands.

The autopsy showed a dilated right heart with fatty degeneration, pulmonary edema. A large gall stone was lodged at the junction of the hepatic and cystic ducts and there were other

stones in the liver substance. The brain was edematous, weighing 1230 grams.

No. 632. L. G. 4198. White, female, aged at death 34. Family and personal history negative. Married at 18; had 8 children. Her epilepsy began at 14. Initial examination negative. Her short Colony residence was terminated by sudden death following seizures and mental disturbance.

Autopsy showed cerebral edema and chronic Bright's disease. Weight, 1195 grams.

No. 633. W. M. 3105. White, male, aged at death 15 years. Family history showed cataleptic fits in a paternal grandfather. Patient was born with an instrumental delivery and weighed over 13 pounds. He had swollen cervical glands when young; petit mal began at the age of 8½. Initial examination was negative; mental state was fair. Appendicostomy was done at the Colony without permanent benefit. He deteriorated rapidly and the terminal event consisted of hemorrhages from the intestine and suppuration of some of the lymph glands.

The brain was very moist and showed an old localized pachymeningitis and a pseudocoele of unusual size. Weight, 1330 grams.

No. 634. M. A. S. 337. Single, female, aged at death 38. Family history included tuberculosis, apoplexy and nervousness and insanity. Personal history negative. Epilepsy began at 11½ years. At the Colony she had an attack of pulmonary edema following seizures, from which she recovered. Terminal event was an ileo-colitis during which bed sores developed.

Autopsy showed fatty changes in the kidneys, old adhesions between the liver, diaphragm and lung opposite. Heart showed endo-cardial change. There were tubercular ulcers in the intestine. Brain soft, with dilated ventricles and marked edema. Weigh, 1290 grams.

No. 635. J. B. 2690. White, male, aged at death 24 years. Father insane; an aunt epileptic. Epilepsy began at one year. Initial examination showed an old scar over the left occiput; marked frontal bosses; otherwise was negative. Feebleminded. Colony life was uneventful; died of serial seizures followed by pulmonary edema.

Autopsy showed a sclerotic brain, especially in the left temporal

region. There was a spot of fresh pachymeningitis hemorrhagica interna. Weight, 1290 grams.

No. 636. H. S. B. 4070. A male, aged 5 years at death. Family history contained conditions resembling epilepsy in several individuals. Patient a twin and had seizures three days after admission. Said to have had rickets. Initial examination negative an idiot. Death occurred from exhaustion following seizures.

Autopsy showed a deformed head with greatly thickened frontal prominence on the right side. The brain was large, weighing 1145 grams. There was beginning pneumonia in both lungs.

No. 637. J. H. 4135. Single, white, male, aged at death 38. Family and personal history negative except for a head injury at the age of 18. The epilepsy began shortly afterward; eloped from the Colony and was later found dead in the water.

An autopsy showed both lungs free from water; there was general congestion and edema, as seen after seizures. Brain moist, congested and rather soft. Weight, 1540 grams.

No. 638. H. C. 2629. Single, white, male, aged at death 23 years. Father at times insane. Little known of early history except that he was born with mis-shapen feet and learned to walk with crutches at the age of 6. Epilepsy began at 11, without other symptoms. On admission to the Colony at the age of 17, he was undersized but well nourished; head macrocephalic, with large frontal bosses and prominent occiput, femurs short and curved; genu valgum and moderate talipes valgus. Mental status fair.

During Colony residence he suffered from mental disturbances, with delusions; and hysteroid seizures were severe and rather frequent. Wassermann reaction negative. The terminal condition was one of physical and mental failure, associated with a tubercular process and ending with a tubercular pneumonia.

Autopsy showed a cloudy arachnoid. The brain was unusually firm and congested, and showed moderately dilated ventricles. Brain weight, 1470 grams.

No. 639. J. M. B. Single, white, male, aged at death 45 years. Patient a twin, the other twin dying at an unknown age after a paralysis lasting 4 months. Said to have been a precocious

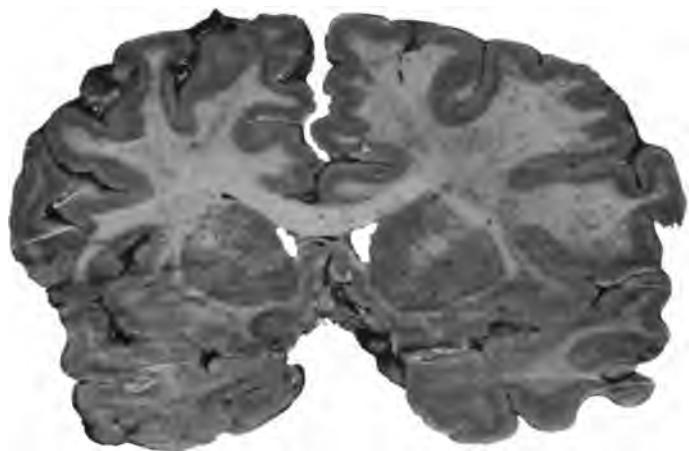
child, starting school at the age of 5 years and making excellent progress. Between the ages of 11 and 12 he suffered a right sided paralysis which necessitated his learning to walk and talk again. First seizure at 18, the paralysis already mentioned being assigned as the cause. The attacks were frequent after their onset, increasing in severity. Mental deterioration followed, carrying him to the level of an imbecile at the time of his admission to the Colony about fifteen months prior to his death. At this time he was of senile appearance, with asymmetrical face and skull. There was a right sided spastic paralysis, involving mostly the extremities and largely sparing the face.

At the Colony he enjoyed fair general health but was irritable and more or less helpless, averaging from five to ten attacks per month. Left pupil larger than right. There was also the Argyle-Robinson phenomenon. Wassermann reaction negative. Death terminated several hours unconsciousness following a seizure. Pulmonary edema present.

Autopsy showed a massive extra-dural hemorrhage on the right, and the dura on left was collapsed. Under the clot the right hemisphere was of normal size, but its convolutions were compressed and flattened. The left hemisphere was represented only by a sac, except for a mass about the size of an English walnut, which represented the right corpus striatum. External to the latter was a small hemorrhage. Right hemisphere on section showed an old hemorrhage about external to and above the corpus striatum. The right side of the cord was atrophic. The total brain weight was 790 grams, and the hemispheres weighed respectively 600 grams and 95 grams. The intima of the aorta showed much change, suggesting specific aortitis. Lungs showed a few tubercles and also hypostatic pneumonia.

No. 640. M. B. 2358. Female, white, aged at death 15 years. A grandmother died with "convulsions." At four, the patient fell, striking the head. No fracture was recognized. The first seizure was at the age of five years, supposed to be due to the fall.

Upon admission some seven years before death, she presented as a low grade idiot in poor physical condition, with many stigmata of degeneration. Within a few months of her admission, she improved both physically and mentally, to such an extent



AUTOPSY 642.

**TUMOR OF PITUITARY GLAND, SHOWING TUMOR AND DEPRESSION
MADE IN UNDER SURFACE OF BRAINS.**

that she attended school, was able to read letters and carry on a conversation. During this time her attacks were very infrequent, two to six per year, although she had many mornings myoclonic movements or "jerks." During the last three years of her life she failed mentally and her seizures increased in number. Terminal event was a facial erysipelas spreading to the neck and chest, with complicating acute endo-carditis and bronchopneumonia.

Autopsy showed a slight pachymeningitis interna. There was slight left temporal atrophy and slight enlargement of the posterior horns of the lateral ventricles. There was a peculiar band of gray matter underlying the entire cortex and separated from it by a narrow band of white matter. Weight, 960 grams.

No. 641. D. W. 3173. Single, white, male, aged at death 27. Admitted about four years before death. His epilepsy began at the age of seven years, ascribed to difficult dentition. On admission he presented as a well developed male, depressed, but rated intellectually as fair.

During the first six months at the Colony, he had frequent serial attacks, followed by prostration and mental disturbances. Various symptoms led to a diagnosis of incipient tuberculosis. He suffered an attack of typhlitis, and appendectomy with breaking up of adhesions was done. He gradually developed a severe constipation, long periods of mental disturbance occurred and there was great physical and mental deterioration after a year. He was finally operated upon for gastro-intestinal ptosis, the procedure being an anastomosis between the ileum and sigmoid. Shortly after recovering from the anaesthetic, he had a seizure, with hemorrhage from the bowel and died.

Autopsy on the head showed a marked cerebral edema; posterior horns of the lateral ventricles were moderately dilated, and a small pseudocele was present. Weight, 1252 grams.

No. 642. A. L. G. Single, white, female, aged at death 45 years. Family history shows cancer and nephritis and an alcoholic father. Patient was only survivor of four children. At 5 she had attack of meningitis, in the course of which she was comatose for 60 hours. Epilepsy began at the age of 11, when she had several grand mal attacks during the night, followed by a well

developed left hemiplegia in the morning. The paralysis above mentioned gradually disappeared but later reappeared. Once during a period of mental disturbance she was taken to a general hospital and from there transferred to a hospital for the insane, where she remained 13 months. After this she remained at home until admitted to the Colony, eleven years prior to her death. At this time she was under nourished, with poor peripheral circulation and enfeebled mentality. The knee jerks were slightly exaggerated, and there was an intention tremor of the left upper extremity. The thyroid was small. There was spacing of the teeth.

During her Colony residence, she had fairly frequent seizures but was usually up and about and a fair worker in the sewing and mending rooms. Her most striking characteristic was the recurrence of an hysterical aphonia and visceral delusions. During the last two months of her life she failed physically and mentally without objective symptoms. Death followed a series of attacks.

The autopsy showed a slender female, with bronzed face. The calvarium was thickened posteriorly. The dura and leptomeninges were adherent. Hydrops of the subarachnoid space. Tumor of the pituitary gland, elevated above the level of the base of the skull and forming a corresponding depression between the two frontal lobes. The tumor was a trifle more than an inch in all diameters and weighed (after fixing with formalin), 16 grams. The growth was not infiltrating, but had pushed aside the walls of the enlarged sella on the right side. The optic nerves were elevated and greatly flattened by the tumor. The brain showed no other gross changes and weighed 1280 grams.

Examination of the trunk showed scanty pubic hair and a fair amount of adipose tissue. The lungs were congested. Slight intimal changes above aortic ring. The liver and kidneys were somewhat fatty. The thyroid weighed 17 grams. Pelvic organs of post-climacteric type.

Histological examination of the tumor showed it to be composed of anterior lobe tissue with acini somewhat compressed. The thyroid was largely made up of colloid containing acini. The interstitial cells of the ovary were present but reduced in amount.

No. 643. A. C. 426. Single, white, female, aged at death 30

years. The patient was well up till her 13th year, when she had her first attack, attributed to witnessing the accidental death of her father.

Admitted to the Colony some 16 years before her death, she presented in fair condition. She enjoyed fair health but was hypochondriacal. Seizures were very frequent. Mentally, she demented though not to a low grade. She was found dead in bed one morning, death being presumably due to a seizure.

The autopsy showed the usual findings seen where death occurs after a seizure. In addition the brain showed flattening of the convolutions and was moist and soft. There was a pea sized tumor of the septum lucidum, and there were three blebs under the ependyma of the roof of the left lateral ventricle. The brain weight was 1390 grams. The heart was infiltrated with fat and there were intimal changes about the aortic and pulmonary valves. The mitral flaps were thickened. The right side of the heart is dilated. Both lungs were congested and edematous. The kidneys were large and cyanotic and show some retention cysts.

Histological examination of the tumor like mass from the septum showed mostly glia tissue, though the central portion of the mass, which on section was pinker than the periphery, showed cells of a more active type.

No. 644. L. R. 3545. White, female, single, aged at death 27 years. Scarlet fever at the age of 6. Her epilepsy began at 12 years of age, at first being like a faint and later becoming a convulsion. She was admitted to the Colony three years prior to her death, and presented as a young woman of four years mental age, without significant physical findings. A seizure which was recorded at the Colony was confined to the right side, was of short duration and showed no clonic state. She was slightly confused afterwards. Another seizure began on the left side and involved the whole body. She had a considerable number of seizures while at the Colony and died from pulmonary edema and exhaustion following status.

The brain showed a focus of softening in the right uncinate region; the brain substance was congested. Weight 1170 grams. There was congestion and edema of the lungs. The tips of the Malpighian pyramids were sclerotic.

No. 645. E. F. D. 3389. White, female, single, aged at death 18. Whooping-cough and cerebro-spinal meningitis at the age of four years and measles and diphteria, respectively, at the ages of 7 and 8. Twice admitted to the Colony, the last time 4 years prior to her death. The onset of her epilepsy was at four years, supposedly due to the meningitis. She presented as a well developed young girl without abnormal physical findings. Her mental state is that of an imbecile. Her life at the Colony was uninteresting. She attended school but made unsatisfactory progress. She showed progressive mental deterioration and developed pulmonary tuberculosis, which finally caused her death.

Autopsy showed an unusually thick skull. The cortex was negative except for a somewhat coarse pattern of the convulsions. Section is negative except for slight dilatation of the left ventricle. Weight 1090 grams.

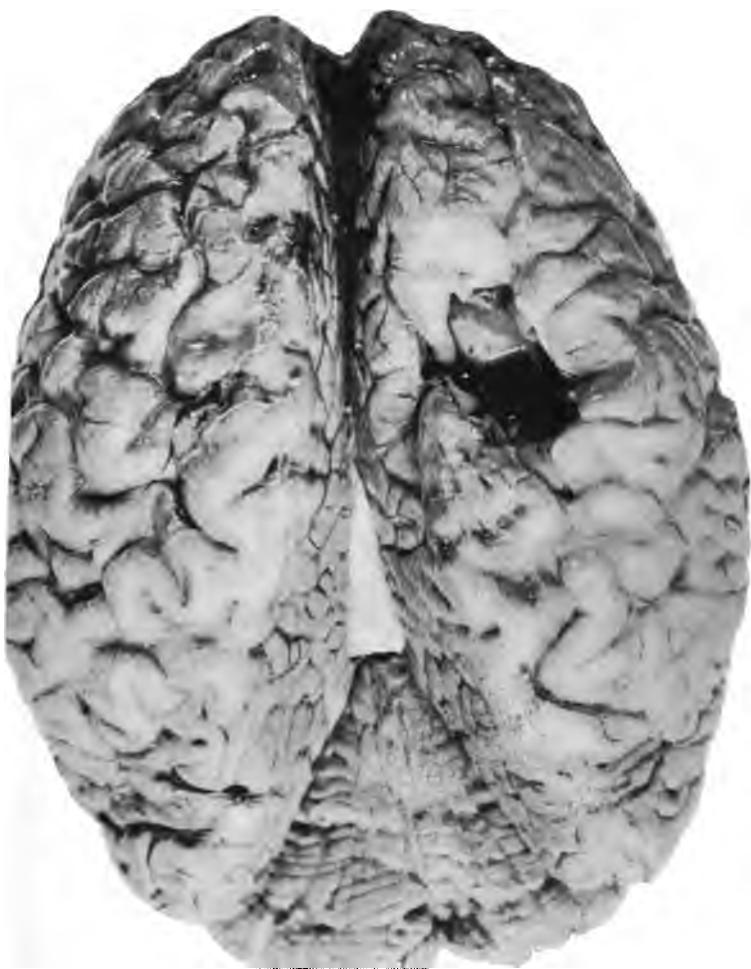
No. 646. J. H. J. 2903. White, male, aged at death 17 years, Epilepsy began at the age of 18 months, supposedly due to dentition. Apparently no attacks occurred between the ages of 2 and 9 years. At the latter age following indigestion, he had seizures and developed cerebro-spinal meningitis; this lasted 6 weeks. The diplococcus was not found and the possibility of a serous meningitis was entertained. After the meningitis the seizures occurred quite frequently. When admitted six years prior to his death, he presented as a well nourished middle grade imbecile without significant physical findings.

Residence at the Colony uneventful aside from a mild attempt at suicide. Death due to exhaustion following seizures.

Brain large (1440 grams) and showed congestion and edema.

No. 647. E. C. K. Single, white female, aged at death 16. Family history shows that two of patient's sisters died of convulsions. Mother under severe mental stress at birth of patient, who was puny and of retarded mental development. She had measles, whooping cough and chorea just before the onset of her epilepsy at 11. Her first attacks were said to be purely motor. When admitted to the Colony at the age of 14, she presented as an ill-nourished imbecile child. She was unable to make progress in school and deteriorated mentally. Death due to tuberculosis.

Brain showed right hemiatrophy and left temporal atrophy. There was a small nodule in the foramen of Monroe and a small



AUTOPSY 651.
CORTEX SHOWING DEPRESSION FOLLOWING TREPHINE.

tubercle in the right choroid. Congested and edematous. Weight, 1250 grams. Heart showed myocardial degeneration and a widened mitral valve. Fibrino-purulent pleurisy. Pulmonary tuberculosis with cavity formation. Abdominal lymph glands tubercular. Numerous gall-stones. Chronic parenchymatous nephritis. Colonic diverticula present.

No. 648. J. J. M. Single, white, male, age at death 27. Epilepsy began at 13, without assigned cause. He came to the Colony about five years before his death, in excellent condition. He had fairly frequent seizures and some mental disturbances. Generally he was quiet and contented and showed some artistic talent. Death was due to pulmonary edema following serial attacks.

Autopsy showed a congested brain, weighing 1400 grams. Lungs were very edematous. Heart dilated on right side. Considerable intimal change in aortic ring and some in coronaries.

No. 649. W. O'L. 3070. White, male, youth, admitted at age of 17, died at 22.

Patient had first convulsions at one year of age. He attended school and made good progress but his fits prevented further attendance. Epilepsy said to have begun at four years. He presented as a small youth, with internal strabismus; feeble-minded. He wandered away from the Colony a couple of times but the clinical history was otherwise negative. Died without significant symptoms about three hours after a single seizure.

Brain showed left temporal atrophy, with softening under the tip of the right frontal lobe. Weight, 1360 grams.

No. 650. F. B. K. 4190. White, female, divorced, aged at death 47. History lacking in information. Initial examination negative. Apparently a dement. The terminal event was considered a uraemia.

Autopsy showed acute nephritis.

No. 651. G. J. 2947. Male, white, married, admitted at 56 and died at 61 years. Parents alcoholic. Onset of epilepsy at 30, supposedly due to fractured skull. Initial examination shows old trephine opening over motor region, arcus senilis, slight pulmonary signs, systolic murmur at the cardiac apex, knee jerks exaggerated with left knee clonus. Left hemiplegia. The trephining followed the accident by one year and the seizures developed during convalescence from the operation. At the Colony, he lived

a quiet, useful life, having a few severe seizures. Terminal illness began with diarrhoea and the urine showed albumin and casts. Death was immediately due to heart failure following seizure.

Autopsy showed adhesions and a small cyst under the trephine opening. Lungs negative. Heart hypertrophied, with mitral incompetence and atheroma about the aortic valves and in the aorta. Chronic parenchymatous nephritis. Brain weight 1425 grams.

No. 652. L. K. 1514. Single, white, female, aged at admission 14, and at death 25. An uncle was epileptic and the mother thought that epilepsy was in the family. Onset of epilepsy at 8 years, secondary to meningitis. Initial examination negative. Feebleminded. Systolic murmurs over the aortic area; later incipient tuberculosis was recognized. She was found dead, apparently having had a seizure. Autopsy negative, except for the usual findings in after seizure death. Brain weight 1270 grams.

No. 653. J. DeG. 2851. White child, aged on admission 4 and at death 10 years. Onset at 4 months. Patient has slight left strabismus and a right paralysis with facial asymmetry and undescended testicles. Sensation is impaired on right and there is a right Babinski. The two sides show a difference in temperature. Mental status good. He improved somewhat after admission. Shortly before death he gave a positive luetin test but a negative serum Wassermann. Trephining was attempted but he collapsed before the bone was perforated.

Autopsy showed a tremendous left hemiatrophy. Brain weight 1125 grams. Large thymus.

No. 654. A. L. 2769. Single, white, female, aged at second admission 17 and at death 23. Fall at age of one. Onset at 5 years. Slight inequality in action of facial muscles. She was found dead in bed on her face, apparently after a seizure.

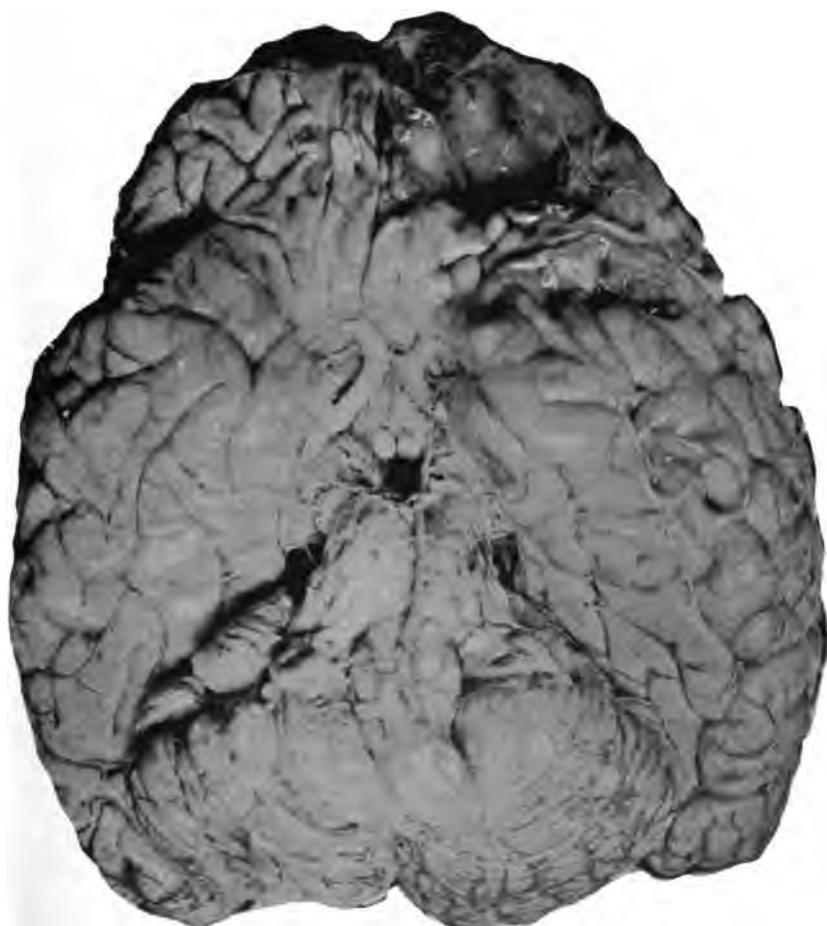
Autopsy showed encephalomalacia. Brain weight 1050 grams. Heart very small, 185 grams.

No. 655. F. F. 3969. Male child, admitted at 4 years and died one year later. Said to have developed naturally till three years when he fell twice. Onset of epilepsy at 4 years. Left side weaker than the right and he is unable to walk. Flaccid paralysis of left side. Is an idiot. Death due to diarrhoea and seizures.

Autopsy showed a small brain, weight 730 grams with narrow atrophic convolutions.



AUTOPSY 651.
INNER SURFACE OF DURA SHOWING ADHERENT BRAIN
SUBSTANCE AT TREPHINE OPENING.



AUTOPSY 658.
BROWN SOFTENING ON UNDER SIDE LEFT HEMISPHERE.

No. 656. B. B. 2630. A white female child aged 11 years at admission and died at 18 years. Family history bad. Onset in early infamy. Paralyzed at 8 or 9 years following a run of seizures. At the time of her admission, she was an idiot with facial asymmetry and right hemiplegia. Had bone tuberculosis. She gradually failed and died of tuberculosis.

Autopsy showed a slight hemiatrophy with recent pachymeningitis. Brain weight, 1005 grams.

No. 657. E. B. 2828. Single, white, female, aged 55 years at admission and 61 years at death. She was born by an instrumental delivery and had whooping cough at 7 years. Onset of epilepsy at 26 years. Mentally deficient since birth, but has failed. Urine at one time contained albumen and casts but was later clear. Died from tuberculous enteritis.

Autopsy showed a moist brain with beginning vascular changes and slight left temporal atrophy. Weight 1175 grams.

No. 658. M. W. 3117. Single, white, female, aged at admission 48, and at death 55 years. Cause of epilepsy given as typhoid fever. Fell, fracturing skull at 45 years. Onset of epilepsy at 11 years. About four months before death she complained of pain in the gall bladder region and the day before death an operation showed carcinoma of both gall-bladder and liver.

Autopsy showed extensive pachymeningitis and marked brown softening of the left inferior frontal surface and of the temporal convolutions. Weight, 1030 grams. Extensive carcinoma of liver and gall-bladder, with stones in the latter.

No. 659. E. L. 3607. White, single, female, aged 13 years at admission and 16 years at death. Doubtful case of epilepsy far remote in family. She claimed to have been raped prior to her admission. Onset of epilepsy at 11 years. Had many seizures, with some series. Developed pyorrhea alveolaris and anaemia. Stated to have had valvular heart lesion. Failed gradually and died.

Brain moist and anaemic, 1170 grams.

No. 660. A. O. 2602. Single, white, male, aged at admission 44 years, died at 51 years. Family history contains insanity. Onset said to have been at 44 years. At the Colony, patient showed disturbances of sensation, some ataxia and sometimes

a pupillary reaction to accommodation but not to light. Tremor of hands. Optic fundi negative. Condition variable. Several diagnosis made of which tabes dorsalis and cerebro-spinal syphilis were best. Wasserman negative on serum.

Autopsy showed a negative brain and cord. Great calcification of an aortic valve having only two cusps. Chronic parenchymatous nephritis. Spleen very large, 495 grams.

No. 661. H. McC. 2608. Married, white, female, aged 57 years on admission, died at 64 years. A left hemiplegic woman, having had a stroke at 55 years. Seizures followed the stroke. A dement. Died from broncho-pneumonia.

Brain small and shows large area of brown softening in right upper motor and parietal areas. Ventricle slightly dilated. Weight, 975 grams.

No. 662. H. A. H. 3295. Age at admission 48 years, at death 52 years. Family history shows a neurotic mother, who suffered from headaches and died of eclampsia. One grandparent alcoholic. Patient was a puny baby, cross, irritable and was given large doses of soothing syrup. Had an accident to the head at 17 years. Onset at 37 or 38 years. When admitted to the Colony the physical examination was negative. His life here was negative and he failed mentally and physically. Wassermann negative. Consultant suggested paresis as a more probable diagnosis than epilepsy. Became unconscious at end of some weeks illness and died.

Autopsy showed a capsular hemorrhage of some age. There was a small white exudate on the tip of the right temporal. Cord appears asymmetrical and shows possible posterior tract degeneration. Weight 1385 grams.

No. 663. J. R. 2039. Admitted at 19 years, died at 28 years. Father suffered from headaches and a paternal grandfather died of melancholia. Onset of epilepsy at 17 years. No cause stated but it was noted that patient was drunk for first time about the same age. Had external strabismus or right eye and left half of face was more vigorous than right. Mental state was good. Physical examination otherwise negative. Many accidents during Colony residence. Failed mentally and died of a pneumonia.

Brain negative except for a focus of softening on the under surface of the frontal lobes. Weight 1470 grams.



AUTOPSY 661.
EXTREME BROWN SOFTENING RIGHT HEMISPHERE.

ANNUAL REPORT OF THE STEWARD

SONYEA, N. Y., October 1, 1915.

To DR. WM. T. SHANAHAN, *Medical Superintendent*:

I have the honor and pleasure to submit to you herewith for the twenty-second annual report of the Craig Colony for Epileptics, which is the nineteenth annual report made by the steward and the eighteenth annual report made by me.

This report cover the cost of maintenance of the Institution, the receipts of the farm, garden and dairy, summary of industries, miscellaneous sales and the debit and credit accounts of the farm, garden and dairy, for the year ending with September 20, 1915.

I also submit to you two copies of the inventory of the personal and real estate belonging to the State of New York, at the Craig Colony, on October 1, 1915.

This inventory is made in the usual form and in accordance with the State Charities Law and rules made by the Fiscal Supervisor of State Charities.

The total value of real estate and personal property, October 1, 1915, is \$1,294,029.24. The value of real estate has increased \$63,000, by the completion of central power and heating plant, \$18,000; new barn at west group, \$5,000; improving water supply and sewage disposal, \$25,000; improving water supply, \$15,000.

The value of personal estate has increased over last year, \$28,524.38. This increase in personal estate is largely due to the increase in value of steam pumps, condensors, generators and boilers in the power house. All of the above items are shown by chapter and law in the summary of the inventory, showing a total increase of personal and real estate of, \$91,524.38.

There are special fund appropriations for four employees cottages, amounting to \$13,300 that are not completed but will make an increase in real estate appropriation another year.

On May 27, 1913, our laundry building and a large portion of the machinery, was destroyed by fire.

Your board was unable to procure an appropriation for reconstructing the building and replacing machinery until June 10, 1914, when an appropriation of \$15,000 became available.

The amount asked for was \$21,000 which was reduced by the Legislature to \$15,000. If the full amount asked for had been appropriated, the laundry could have been completed so as not to have required any special appropriation for many years to come. I wish to call your attention to the present needs of the laundry.

First.—The old engine now in use in this building was an old engine that had been condemned for several years. It was put in the laundry as a makeshift until a new engine or motor driven equipment could be purchased. This old engine was purchased by the Colony for use in the brick yard eighteen years ago and was a second hand engine at that time. It is liable to break down at any time when it will be absolutely necessary to make a large expenditure to replace it.

Second.—A number of the washing machines are worn out and should be condemned. Some of them have been in use since the Colony was opened twenty years ago, and when repairs are needed, it is almost impossible to procure them on account of the machines being out of date and no extra parts manufactured for them. I would recommend that you ask for an appropriation sufficient to purchase and install in the wash room in the laundry, six 37 by 64 inches all metal brass cylinder washing machines motor driven; one starch machine, motor driven; seven motors for present extractors; one motor for starch machine; four motors for dry rooms; one motor for soap machinery; one edger steam heated, with an addition to the present panel control sufficient to drive all of the above machinery by electricity.

If the above machinery had been installed at the time the contract was made for the ironing machinery that has recently been placed in the laundry it could have been done for about \$8,000, but it will require an appropriation of \$10,000 to install this machinery under a separate contract.

The contract for installing the machinery for ironing is nearly completed, with the latest up to date machines, all motor driven and electric or steam heated. The electric heated flat irons allow us to discard the old coal stove that was used for heating irons and reduces the danger of fire to a minimum.

A PART OF THE REBUILT PORTION OF IRONING ROOM IN COLONY LAUNDRY



I wish to again call your attention to the necessity for an improved cold storage plant. The waste of meats and other provisions by not having a cold storage room that can be reduced to a temperature of freezing is, in my opinion, quite enough each year to pay the interest on an appropriation for the construction of a modern up to date cold storage room. The old cold storage room can not be cooled down to less than 45 degrees. It is too small for our needs and impossible to be kept in a sanitary condition. The cold room is in connection with an old ice house built at the time the Colony was founded and was a makeshift at that time. This entire building is unsightly and takes up valuable room on one of the pleasantest lawns on the Colony grounds.

I desire to mention some of the difficulties in making estimates and purchasing supplies under some of the rules made by the fiscal and auditing departments in Albany. Some of these rules cause a great waste of time and encumber the institution with unnecessary and uncalled for work. I refer to the system of ordering supplies, which makes it necessary to write all orders in quadruple, one copy sent to the dealer, one to the Fiscal Supervisor, one to the State Comptroller and one retained by the Institution. This is a burdensome, cumbersome system, entailing an immense amount of clerical work that adds nothing to the efficiency of the State's fiscal work. These orders are numbered consecutively regardless of whether they are for general fund or special fund purchases. If the amount of the order exceeds \$1,000, the original or dealer's copy of the order must be forwarded to the State Comptroller for his approval before it can be sent to the dealer. Many times bids are received by the Institution marked "*Immediate acceptance*" which exceed \$1,000 and it takes three days to get the approval of the State Comptroller or Fiscal Supervisor stamped on the order before it can be forwarded to the dealer. In the interim the price of the goods may have advanced and the whole thing must be gone over at a loss to the State. There may be some good points to the system but we know of none. If there are any, it must be in the Fiscal Supervisor's department or the office of the State Comptroller, while as above stated, it adds an immense amount of clerical work to the Institution, it must also add a number

of clerks to the Albany department in checking and re-checking orders in quadruple, which are forwarded to Albany by the charitable institutions each year and is simply duplicating and reduplicating the approval of estimates that have already been approved by the State Comptroller, and in some instances, where the estimate is for construction work by the State Architect.

Maintenance

The average number of patients cared for daily was 1450.24. There were 1428.2 cared for last year, which shows an average increase during the year of 22 patients. The actual cost of caring for these patients including home product was \$354,087.44 or \$244.16 for each patient.

The actual cost to the State after deducting all refunds, home product and reimbursements was \$288,954.60 or \$199.25 for care of each patient. This shows an increase of \$11.37 in the cost of caring for each patient during the year.

The following table shows the total cost of maintenance with and without home product, the total amount drawn from the State treasury and the total amount refunded, together with the per capita cost of maintenance.

The daily number of patients cared for during the year was	1,450.24
The total cost of maintenance, including home product consumed, was	\$354,087 44
The per capita was.....	244 16
The total amount drawn from the State Treasury was	322,657 74
The per capita cost was.....	222 49
The total amount refunded from all sources.....	33,703 14
The net cost to the State was.....	288,954 60
The net per capita cost of maintenance was.....	199 25

The per capita cost of divisions of maintenance without home product, but including actual cash expenditures as shown by said vouchers:

Estimates 1 and 2, wages and labor.....	\$93.1529
Estimate 3, provisions.....	52.2242

Estimate 4, general supplies	\$5.2796
Estimate 5, farm and garden.....	8.3886
Estimate 6, clothing.....	13.1898
Estimate 7, furniture and furnishings.....	4.9279
Estimate 8, transportation of inmates.....	.2742
Estimate 9, fuel and light.....	22.3401
Estimate 10, ordinary repairs and shops.....	10.0377
Estimate 11, medical supplies	3.5189
Estimate 12, miscellaneous.	8.7356
Estimate 13, industries .. . .....	.2205
Estimate 14, lawns, roads and grounds.....	.1963
 Total	 \$222.4863

Farm

The total number of acres in the Colony farm is 1898 of which 624 acres are available for cultivation and the remaining 1174 acres are in lawns, buildings, permanent wood lands and other land not suitable for cultivation.

At the close of the year, the value of all lands and buildings used exclusively for agricultural purposes was \$46,700.00, figuring the land that is cultivated at \$75.00 per acre. The farm machinery, tools, implements and live stock was \$21,752.90, making a total valuation of the cultivated land and farm equipment of \$68,452.90. This may be considered the working capital for the farm, garden and dairy, upon which the rate per cent of profit or loss is based. Taking into consideration the home product reports and the inventory values, the total credit account for the farming operations was \$40,170.06 and the total debit account was \$31,241.42, making the net profit for the year, \$8,928.64, which is a return of thirteen per cent upon the investment.

The season on the whole was very favorable for the crop products, especially hay and corn. On account of the heavy frost on May 27th, there are no apples, a fruit that we usually have had in abundance and which will be greatly missed.

While there has been no material increase in the farm and garden crops, we can not reasonably expect a very large increase until more of our land is cultivated and we have sufficient storage

room for hay, grain, potatoes and vegetables. We have been obliged to stack a large amount of hay and thresh all of the grain from the field and stack the straw. We have more potatoes than we have storage room for. Our potato cellar will not hold over one-half of them. The garden vegetables are abundant. We will have all that can be used until vegetables grow another year. There is not half storage room enough for the large crops.

As stated in former reports, we have no more storage room for vegetables and potatoes, hay and grain now than we had when the Colony was first opened for the admission of patients. There should be an appropriation sufficient to construct a potato and vegetable cellar also for the care of apples.

A start has been made towards the completion of the policy of dividing the farm into three separate farms by the erection of a barn at the West House group. We need an appropriation for a farm cottage for the assistant farmer and his wife, that will care for about fifteen patients, also an appropriation sufficient to construct a silo and some tool sheds, then this part of the farm can be operated as a separate farm and will be a great relief to the present farmer and in my judgment will add materially to the farm products in general.

In order to carry out your policy of dividing the Colony lands into three separate farms, an appropriation should be procured for the erection of farm buildings on the sheep farm. We also need an appropriation sufficient to build a horse barn in the present farmstead group, as many of our horses are stabled in sheds that are needed for cows and calves. We should have at least one thousand dollars to purchase agricultural tile so that the whole of "North Field" could be ditched. We can make the tile if we had suitable machinery in the brick yard plant.

Dairy

The average number of cows giving milk during the year was 60, which is a few less than were giving milk the previous year. The total number of pounds of milk was 438,678 or an average of 7310 pounds of milk for each cow, which is a very large product considering that the milk is of an exceedingly high grade, testing five per cent butter fat or better.



INTERIOR OF REMODELED DAIRY BARN BASEMENT

We have completed the repairs on the cow barn with the exception of painting and the paint is in the barn ready to be put on the walls. With the exception of a milking machine, we have a model dairy barn and I would suggest that you ask for an appropriation for a milking machine which would complete our dairy equipment.

Dairy Receipts

Milk produced was 219,338 quarts or 438,678	
pounds, worth	\$9,321 86
Dairy cows killed for beef, 5,003 pounds, worth..	500 30
Veal, 81 pounds, worth	12 15

	\$9,834 31

Cost of production

Feed purchased	\$2,300 50
Home product hay, ensilage, etc.	3,152 00
Salary of dairyman	600 00
Wages of assistant	360 00

	6,412 50

Leaving net proceeds of dairy	\$3,421 81

Hogs

Hogs killed and used for provisions, 9,382 pounds, worth	\$1,125 84
Lard, 932 pounds	102 52

Total	\$1,228 36
Salary of caretaker	\$420 00
Cost of feed purchased	555 11

	975 11

Net profit	\$253 25

Soap Plant*Laundry soap manufactured*

Neutral soap chips, 33,400 pounds at 6 cents.....	\$2,004 00
Scouring soap, 1,430 pounds at 6 cents	85 80
Laundry soap, 8,774 pounds at 6 cents.....	526 44
Toilet soap, 6,850 pounds at 7½ cents.....	513 75
	—————
	\$3,129 99
	—————

Summary of Industries

Arts and crafts school.—Work done by patients with one paid employee	\$622 45
Blacksmith shop.—Work done by patients with one paid employee	1,817 21
Brickyard.—Work done by patients with one paid foreman and two paid employees.....	1,300 00
Carpenter shop.—Work done by patients with two paid employees	5,227 79
Dressmaking department.—Work done by patients with two paid seamstresses	3,835 76
Laundry soap plant.—Work done by patients with assistance of laundryman	3,129 99
Mattress and broom shop.—Work done by patients with one paid foreman	2,266 94
Paint shop.—Work done by patients with two paid employees	2,008 00
Printing office.—Work done by patients with one paid employee.....	1,528 50
Plumbing shop.—Work done by patients with two paid employees	2,194 50
Shoe shop.—Work done by patients with one paid employee	1,175 15
Sloyd school.—Work done by patients with one paid teacher	228 05
Tailor shop.—Work done by patients with one paid employee	3,306 98
	—————
Total	\$28,641 32
	—————

Miscellaneous Sales

Brick	\$518 00
Board	1,127 64
Ice	55 32
Rentals	4,114 00
Rags, scrap iron, etc.	264 87
Uniform material	270 05
 Total	 \$6,349 88

Accounts of Farm, Garden and Dairy*Credits*

Asparagus, 3102 pounds	\$372 24
Beans, 200 bushels (estimated).....	600 00
Beans, string, 7,575 pounds.....	189 37
Beans, lima, 3,110 pounds	191 60
Beans, fodder, 7 tons (estimated).....	70 00
Beets, 75 $\frac{1}{4}$ bushels	37 62
Beef, 5,003 pounds	500 30
Beet greens, 4,510 pounds	90 20
Beets, 500 bushels (estimated).....	250 00
Blackberries, 20 quarts	2 00
Cabbage, 25 tons (estimated).....	300 00
Cabbage, 24,673 pounds	148 04
Carrots, 28 $\frac{1}{2}$ bushels	11 40
Carrots, 600 bushels (estimated).....	240 00
Cauliflower, 1,040 pounds.....	41 60
Celery, 3,215 pounds	156 25
Celery, 8 tons (estimated).....	400 00
Chicken, 196 pounds	37 24
Corn, fodder, 10 tons.....	35 00
Corn, green, 7,250 pounds.....	72 50
Corn, pop, 5 bushels	5 00
Cucumbers, 4,152 pounds	83 04
Cucumber pickles, 915 pounds.....	27 45
Currants, 464 quarts	37 12
Eggs, 745 dozens	223 50
Egg plant, 5 pounds	25
Ensilage, 600 tons (estimated).....	2,100 00

Grass seed, 12 bushels	\$36 00
Hay, alfalfa, 117 tons.....	2,106 00
Hay, timothy, 204 tons.....	5,586 00
Hay, timothy and clover mixed, 225 tons.....	1,250 00
Lard, 932 pounds.....	102 52
Lettuce, 29,615 pounds	2,369 20
Lettuce, 1,000 pounds (estimated).....	70 00
Manure, 411 tons	411 00
Milk, 219,338 quarts	9,321 86
Musk melons, 2,575 pounds	103 00
Oats, 3,942 bushels	1,852 74
Onions, 97 1/4 bushels	97 25
Onions, green, 5,725 pounds.....	114 50
Onions, 400 bushels (estimated).....	400 00
Parsley, 113 pounds	5 65
Parsnips, 15 tons (estimated).....	450 00
Peas, green, 599 pounds.....	14 97
Peppers, 40 pounds	1 60
Pork, 9,382 pounds.....	1,125 84
Potatoes, 533 1/2 bushels	446 20
Potatoes, 6,400 bushels (estimated).....	3,200 00
Radishes, 16,360 pounds	409 00
Raspberries, red and black, 1,112 quarts.....	133 44
Rhubarb, 7,320 pounds	146 40
Sage, 150 pounds	7 50
Salsify, 10 tons	600 00
Spinach, 194 pounds	6 79
Squash, Hubbard, 12 tons (estimated).....	240 00
Squash, summer, 16,960 pounds.....	169 60
Straw, 65 tons (estimated).....	650 00
Strawberries, 781 quarts	62 48
Tomatoes, 12,610 pounds	126 10
Turnips, 2,025 pounds	20 25
Turnips, 20 tons (estimated).....	400 00
Veal, 81 pounds.....	12 15
Wheat, 860 bushels	860 00
Lumber, hard and soft, 27,532 feet.....	488 30
Firewood, 201 cords	552 00
 Total credit	 \$40,170 06



TURKEYS FOR THANKSGIVING DAY DINNER.

Farm debit

Alfalfa, green, 40 tons.....	\$340 00
Alfalfa seed, 6 bushels, 55 pounds.....	69 94
Bean, fodder, 1 ton.....	10 00
Beans, seed, 15 bushels.....	45 00
Bran, 108,270 pounds	1,454 17
Bull, 1	150 00
Calf meal, 1,200 pounds.....	35 70
Corn feed, 451 bushels.....	476 59
Corn meal, 1½ tons.....	45 00
Corn, cracked, 56 tons.....	1,785 75
Corn, fodder, 10 tons.....	25 00
Corn, seed, 50 bushels.....	42 50
Dynamite, 200 pounds	30 00
Eggs, 34 dozens	10 20
Ensilage, 391 tons.....	1,368 50
Farm and garden implements	1,404 87
Fertilizer, 83,200 pounds	915 00
Fence, 300 rods	72 00
Gluten meal, 34 tons.....	1,007 12
Grease, axle, 100 pounds.....	4 10
Hay, 231 tons	4,233 00
Horses, 7	1,530 00
Lime hydrate, 2 tons.....	20 00
Lime, agricultural, 75 tons.....	406 75
Malt sprouts, 8 tons.....	207 00
Middlings, 19,289 pounds	255 12
Manure, 411 tons	411 00
Milk, 17,845 quarts	759 65
Miscellaneous farm and garden seeds.....	611 79
Oats, 2,869 bushels	1,434 50
Oil meal, 28,830 pounds.....	498 62
Plants, egg plant and tomato.....	35 20
Potatoes, seed, 700 bushels.....	385 00
Sal soda, 350 pounds.....	2 56
Screenings, wheat, 81 bushels.....	48 60
Sawing lumber	110 23
Seed clover, 6½ bushels.....	65 00
Seed, timothy, 35 bushels.....	112 00

Straw, 101 tons	\$1,010 00
Threshing	163 53
Binder twine, 702 pounds.....	62 83
Veterinary services and medicines.....	128 60
Wages	9,180 00
Wheat seed, 150 bushels	150 00
Wheat, 129 bushels	129 00
Total debit	\$31,241 42

Recapitulation of Farm, Garden and Dairy Products

Value of products raised.....	\$40,170 06
Cost of production	31,241 42
	\$8,928 64

Summary of Gross Earnings of the Colony for the Year

Total value of products on the farm, in the garden and in the dairy.....	\$40,170 06
Value of brick made.....	1,300 00
Value of soap made.....	3,129 99
Other industries, shops, etc.....	24,211 33
	\$68,811 38
Reimbursements from counties for clothing furnished patients.....	\$19,462 02
Money received from individuals for care and treatments of patients....	7,891 24
Miscellaneous sales	6,349 88
	33,703 14
Total	\$102,514 52

Summary

Total personal property, October 1, 1915.....	\$238,567 31
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Real Estate

One thousand eight hundred and ninety-eight and one-half acres of land, including buildings, elec- tric light plant, water and sewage systems, as per inventory October 1, 1914.....	\$992,461 93
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Increased value of real estate due to additions on account of special fund appropriations completed during the year as follows:

Improving water supply.....\$15,000 00

Chap. 530, Laws 1912.

Chap. 531, Laws 1914.

Chap. 728, Laws 1915.

Improved water supply and sewage dis-

posal..... 25,000 00

Chap. 790, Laws 1918.

Chap. 728, Laws 1915.

Central power and heating plant..... 18,000 00

Chap. 790, Laws 1913.

Chap. 728, Laws 1915.

New barn..... 5,000 00

Chap. 530, Laws 1912.

Chap. 531, Laws 1914.

Total increase real estate during year..... \$63,000 00

Value of real and personal property, October

1, 1915

\$1,294,029 24

Personal property, October 1, 1915. \$238,567 31

Personal property, October 1, 1914. 210,042 93

Increase personal property during year..... \$28,524 38

Increase real estate during year..... 63,000 00

Total increase during year..... \$91,524 38

Dated, Spratling Hall, Craig Colony for Epileptics, Sonyea, N. Y., October 1, 1915.

All of which is respectfully submitted.

T. L. STONE,

Steward.

REPORT OF RESIDENT CATHOLIC CHAPLAIN*September 30, 1915.*

To Dr. Wm. T. SHANAHAN, *Superintendent*:

I herewith submit to you my fifth annual report as Resident Catholic Chaplain of the Craig Colony for Epileptics.

At the present time there are 589 Catholic patients residing at the Colony. Of these 293 are males and 296 are females. During the past year there were 26 deaths among Catholic patients. Six of this number died suddenly and were unable to receive the last sacraments of the church. The Sacrament of Extreme Unction was administered to 37. The remains of 12 patients were buried in the Colony cemetery where the grave was blest after a Mass of Requiem and the prayers prescribed by the church. Two thousand four hundred and seventy-four confessions were heard at the Chapel and a like number received Holy Communion.

The usual services were held on each Sunday and holyday during the year, the Masses being at 8:30 and 10 A. M. An evening service was held on all the Sundays except during July and August. On Sunday at all of the services a short sermon or instruction was given. During Lent special services were conducted during the week.

We wish to report special success in the work of the male choir. The singing of these patients has added much to the solemnity of the service.

The importance of the Chaplain's work at the Craig Colony is founded in the true consolation afforded those for whom temporal blessings are few. The real interest of the patients in the religious services is evidence enough.

As this will be my last report as Chaplain of the Craig Colony, I wish to express my appreciation to officers and employees for the hearty good will and co-operation shown to me during my entire stay at the Colony.

Respectfully submitted,

W. B. McCARTHY,
Resident Catholic Chaplain.



COTTAGES ON KISHAQUA ROAD FOR MARRIED EMPLOYEES

REPORT OF PROTESTANT CHAPLAIN

THE PARSONAGE,

SONYEA, N. Y., *October 1, 1915.*

To the Medical Superintendent:

It is with pleasure that I extend to you my sixth annual report as Protestant Chaplain of Craig Colony.

The number of Protestant patients now at the Colony is 776. Of this number 462 are males, and 314 are females. There have died during the year among those under my charge 32 male and 29 female patients. The remains of the great majority of these have been taken home by relatives for burial. I have accompanied the remainder to the Colony cemetery and assisted in giving them a Christian burial.

Our religious services at the House of the Elders have been about the same as for the past few years: 10 o'clock a. m. and 7 o'clock p. m. on Sundays, and 7 o'clock p. m. on Wednesdays. These services are well attended by the Protestant patients, and seem to be greatly enjoyed. It is a great pleasure to minister to a congregation so appreciative and responsive.

Our congregational singing is most inspiring, and the patients' choir is doing splendid work.

We have had a Sabbath school during nine months of the year for employees' children, and a few of the patients. For lack of suitable quarters we were compelled to discontinue the patients' Sunday school. Of course this was a sad disappointment, but it seemed useless to crowd fourteen large classes into a room only large enough to hold 300 people. Were these all normal people with normal minds such an undertaking might be possible and practical. We deplore this condition of things and hope it may be righted soon.

I have tried to be diligent in visiting the sick and extending encouragement and comfort whenever possible.

There have been a greater number of employees at the services during the past year than any previous year that I have been

connected with the Colony. They have greatly added to the interest of the services.

We heartily appreciate the kindness and good-will shown to us by all the officers, employees and patients alike, and we wish them all God's blessing.

Most respectfully submitted,

J. R. JEFFREY,
Resident Protestant Chaplain.

REPORT OF SUPERINTENDENT OF NURSESSONYEA, N. Y., *October 1, 1915.**To the Medical Superintendent:*

I have the honor to submit the following report of the Training School for Nurses for the year ending September 30, 1915:

Census of the School

Superintendent of nurses.....	1
Assistant superintendent of nurses.....	1
Dietitian.....	1
Night supervisor	1
Day supervisors	7
Chief nurse	1
Graduate nurses	11
Seniors.....	5
Juniors.....	6
Probationers.....	5
Pupils resigned	9
Pupils discharged	1

Under no other form of social or philanthropic work does continuity of service count for more than in an institution for the sick and so it is gratifying to record that there has not been any change in our staff of supervisors.

Commencement exercises were held September 15th when the following nurses, having successfully passed the required examinations, received the diploma of the school:

Miss Robina McLeod,	Mrs. Emma Latting,
Miss Agnes Kingston,	Miss Ida Stapleton,
Miss Mary Cannon,	Miss Eva Tallman,
Miss Alice Stephen,	Mrs. Bessie Raiber.

Five of these pupils received a certificate from St. Mary's Maternity Hospital in Buffalo for a three months' course in maternity nursing. Three pupils received a certificate from Bellevue and

Allied Hospitals, New York city, for having completed a nine months' course in medicine, surgery, obstetrics and pediatrics.

During the past year one supervisor completed a six months' post graduate course in the Presbyterian Hospital in New York, a second supervisor took a three months' post graduate course in the Presbyterian Hospital and three months in St. Mary's Maternity and Infant Hospital in Buffalo and a third supervisor spent six weeks in the Massachusetts School for Feeble-minded. Two pupil nurses have returned from Fordham Hospital after taking a nine months' course and three pupils are there at the present time taking a similar course.

One hundred and fifty-four lectures were given during the year as also 200 demonstrations and many quizzes. In all of these the pupil nurses have shown unusual interest and in almost all instances ratings on examinations have been above the average.

Hopes were entertained last year that the physical comfort of our nursing staff would receive the consideration given in some of the other State institutions and that a commodious nurses' home might be built, but in this we were disappointed. When we consider that the epileptic has seizures night and day and in the majority of cases causes considerable disturbance it does not seem fair that after a period of duty covering twelve and one-half hours a nurse's or attendant's rest should be disturbed, and yet, such is the case, for many members of the nursing staff have sleeping quarters in seventeen cottages occupied by patients. Two cottages set aside for nurses and attendants are located in a group for patients, consequently neither night nor day are they wholly away from the patients. We are indeed thankful for a small cottage which is about to be opened near Loomis Infirmary for four married couples, but there is a pressing need that the body of workers serving the longest hours, having the fewest holidays, and doing the most arduous work should have a well equipped up-to-date nurses' home.

To the medical superintendent, to the lecturers and to the supervisors who have given most hearty co-operation in the work of the training school, I wish to express sincere thanks.

Very respectfully,

MABEL W. DORAN,

Superintendent of Nurses.

REPAIRS AND IMPROVEMENTS ACCOMPLISHED DURING THE YEAR

- House of Elders replastered.
- Interior of Villa Flora, Hospital, Walnut, Beech and Birch Cottages repainted.
- Cement floor in patients' dining-room at Schuyler Infirmary.
- Brick racks repaired and new roof put over engine and brick machine.
- New 4-inch water pipe from spring water main to power house.
- New steam line from Kishaqua creek to laundry.
- Drain at barnyard repaired.
- Coal siding repaired.
- Dining-room and kitchen at brickyard rebuilt.
- New conduit wiring in House of Elders.
- Closets reset and plumbing repaired in Letchworth House.
- Closets reset and plumbing repaired in Villa Flora group.
- New steam line from power house to bridge.
- New doors at rear entrance to Spratling Hall.
- New doors on two entrances to Inn Kitchen.
- New pump, capacity 100,000 gallons per hour, installed in power house.
- New cement walks at Iris and Nasturtium Cottages.
- New cement walk from Spratling Hall to hospital.
- Cement walks in place of wooden walks at four employees' cottages south of Kishaqua Inn, three cottages near standpipe, laundryman's cottage, Pond cottage and rectory.
- New cement platforms and refrigerator rooms at Willow and Birch Cottages.
- Larger water heater installed at Willow Cottage.
- New cement walks at Pryor Pavilion.
- Return steam line at Villa Flora group repaired.
- Cement platforms at rear entrances to Chestnut, Beech, Buck-eye, Tulip Tree, Walnut, Willow, Orchid, Mallow, Lobelia, Kalmia and Jasmine Cottages.
- Cement walk installed in place of wooden walk from laundry to Kishaqua creek.

Woodwork and roofs in Village Green group repainted.
New water heater installed at superintendent's residence.
Green house repaired.
New guard rail on walk from laundry to Kishaqua creek.
New blow-off to chemical tanks at filter house.
New surface intake installed at water softening plant.
Small spring pump connected with 6-inch main at pump house.
Old iron bridge raised and strengthened and new floor installed
in same.

VISITORS

Among those who visited the Colony during the year were the following:

- Hon. Wm. A. Mallery, Jr., Fiscal Supervisor, Albany.
- Hon. Thos. H. Lee, Deputy Fiscal Supervisor, Albany.
- Dr. Max G. Schlapp and Mr. Neustadt, members of Committee to Investigate Feeble-minded.
- Dr. T. C. FitzSimons, Supt., and Mr. C. H. Dorflinger, Trustee, Fairview Hospital for the Insane, Fairview, Pa.
- Dr. G. E. Kineon, Supt., Ohio Hospital for Epileptics.
- Dr. W. S. Bainbridge, New York City.
- Dr. J. T. McCurdy, New York City.
- Dr. W. J. Wansboro, Albany.
- Dr. L. G. Cole, New York City.
- Dr. F. A. Finnerty, Montclair, N. J.

AMUSEMENTS

It seems an injustice to the Colony that long ere this an appropriation has not been made available for the erection of an Assembly Hall of a size commensurate with its needs. The present antiquated frame structure used for this purpose accommodates 350 persons, therefore is entirely inadequate, when one considers that the entire population of the Colony including employees and patients approximates 1,800.

A vaudeville performance was given early in December by Colony officers and employees. Later in the same month an indoor concert was given by the patient's band, orchestra and chorus.

In February the male employees in the Craig Colony Band gave a minstrel show.

On the evening of Washington's birthday a smoker was given by the Colonist's Club, an organization composed of male patients.

In March Folk Dances were presented by school children among the patients.

Mr. George B. Beale, Superintendent of the Northern Division of the Pennsylvania Railroad, again kindly arranged for the use of two passenger coaches on two days in September, thus permitting two excursions of patients to Portage, 280 in all.

A very successful celebration of Independence Day was held on July 5th. There were field day sports of various kinds in the morning, in the afternoon a baseball game with an out of town team and in the evening, fireworks. Because of the high winds, two balloon ascensions and a high wire performance were postponed to July 6th.

Band concerts and dances were held weekly as in previous years.

Baseball games on Wednesday and Saturday afternoons continued to be as popular as ever.

A basket ball and tennis court were built at the Villa Flora group and basket ball courts at the Village Green group and at the Loomis Infirmary.

Sports are not only of value for recreation and exercise, but have a remedial importance in many instances.



SANTA CLAUS AND HIS BROTHER ON ANNUAL TOUR OF COLONY COTTAGES

Some additional work and recreation is being arranged for among some of our infirmary groups with the hope that some beneficial effect on the mental state may result. This has long been done here, but we hope to extend our previous activities along these lines. The loss of memory so commonly seen in epilepsy requires patient, tactful and preserving effort on the part of those having charge of this work.

Occupational therapy has for a large percentage of our patients a marked value when progressively developed, arousing thus new interests and preventing not only the occurrence of seizures, but holding in abeyance or even clearing up what at first sight seemed a permanent mental deterioration.

A simple building for purposes of recreation during the winter months should be erected in the Villa Flora group for the use of female patients. This building should contain a library, gymnasium, in which basket ball, indoor tennis, etc., might be played and also a hall where entertainments might be given and which room would also serve as a general meeting place in the evening.

On October 1st there were in the Colonists' library 3,659 books. An average of about eighty of these books are taken out each month to be read by male Colonists in their cottages. The reading room is well patronized each evening. The following list of publications is received by the club, the majority of these being donated, for which the Colony wishes to express its thanks.

The Outlook,	Ovid Gazette,
The Churchman,	New York Times,
Christian Science Sentinel	Collier's National Weekly,
Christian Advocate,	American Hebrew,
Rural Life,	Hebrew Standard,
American Woman,	The Catholic World,
Popular Magazine,	The Jewish Farmer,
The Colonist,	Extension (Catholic),
Mt. Morris Enterprise,	Pearson's Magazine,
Mt. Morris Union,	Holley Standard,
Dansville Advertiser,	Yates County Chronicle,
Livingston Republican,	Ontario County Times,
Livingston Democrat,	Avon Herald,
The Castilian,	Penn Yan Express,

Hammondsport Herald,
Caledonia Advertiser,
Wyoming County Times,
Democrat & Chronicle,
Rochester Evening Times,

Post Express,
Union and Advertiser,
Buffalo Express,
Jewish Daily News,
Dansville Breeze.

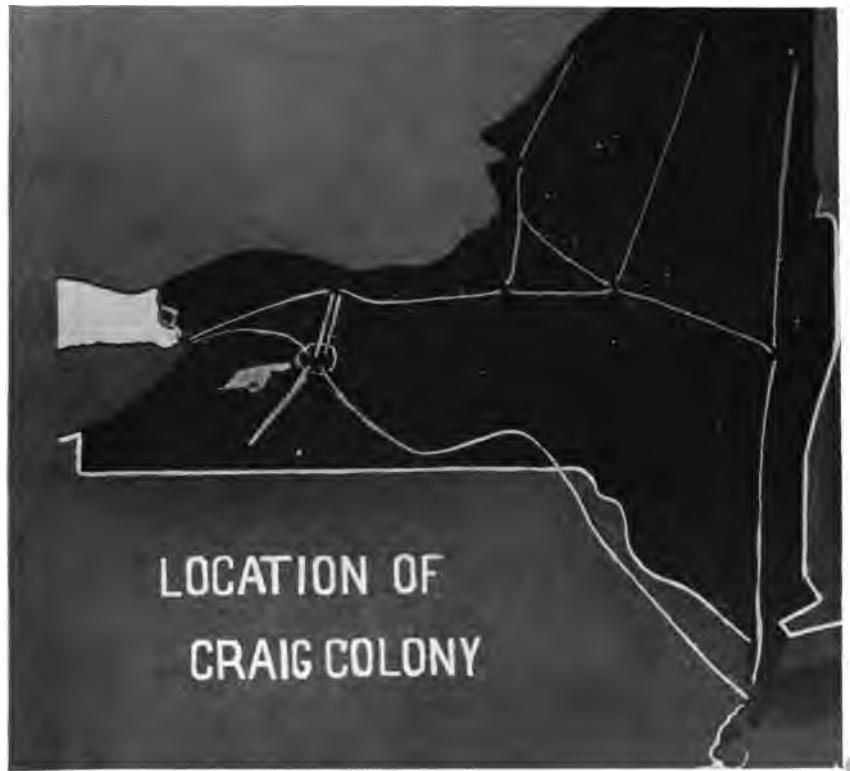
In conclusion I wish to once more express my appreciation of the uniform courtesy extended me at all times by your Board and of the continued co-operation of my co-workers at the Colony, officers, employees and patients.

Respectfully submitted,

WM. T. SHANAHAN,

Medical Superintendent.

THE FOLLOWING ILLUSTRATIONS ARE OF GRAPHIC CHARTS SHOWN AT AN
EXHIBIT MADE BY THE COLONY AT THE LAST STATE CONFERENCE OF
CHARITIES AND CORRECTION.



LOCATION OF
CRAIG COLONY

NUMBER OF EPILEPTICS
PROPERLY CARED FOR IS

3½%



200,000
EPILEPTICS
IN
UNITED STATES

13 STATES HAVE COLONIES

INFORMATION.

PRESENT CENSUS	1483
NUMBER EMPLOYED	249
ACREAGE	1898 $\frac{1}{2}$
TOTAL YEARLY COST	\$ 354,087 .44
YEARLY COST PER CAPITA	\$ 199 .25
VALUE OF PROPERTY	\$ 1,294,029 .24
NUMBER OF BUILDINGS	100

THE NATIONAL ASSOCIATION FOR THE STUDY
OF EPILEPSY AND THE CARE AND TREATMENT OF
EPILEPTICS IS WORKING TO BETTER THE
CONDITION OF THE EPILEPTIC. IT PROMOTES ALL
ASPECTS, THE SOCIAL, THERAPEUTIC, PATHOLOGIC
AND MEDICO-LEGAL.

IF YOU ARE INTERESTED ADDRESS THE
SECRETARY, SONYEA, NEW YORK.

IN THIRD LINE ABOVE "NUMBER EMPLOYED" REFERS TO EMPLOYEES, NOT PATIENTS. OVER HALF OF THE PATIENTS AT THE COLONY ARE EMPLOYED TO A CONSIDERABLE EXTENT. THE REMAINDER BECAUSE OF THEIR EPILEPSY AND ITS ASSOCIATED INCAPACITIES, BOTH PHYSICALLY AND MENTALLY PREVENTS EMPLOYMENT OF ANY KIND.



EPILEPSY "CURES"
THE BASIS OF THESE IS USUALLY
BROMIDES
WHICH IN LARGE DOSES PREVENT
SEIZURES BY MAKING THE BRAIN
LESS ACTIVE. BROMIDES
DO NOT CURE EPILEPSY
IMPROPERLY USED, BROMIDES DO
MORE HARM THAN THE SEIZURES.

READ "EPILEPSY CURE FRAUDS," PUBLISHED BY
THE AMERICAN MEDICAL ASSOCIATION.

EPILEPSY COAGULATION OF BLOOD CROTALIN

THE COAGULATION TIME OF THE BLOOD IN
EPILEPTICS HAS NEVER BEEN PROVEN TO BE
EITHER INCREASED OR DIMINISHED.

WITH ALL ACCURATE METHODS, AND
COMPETENT INVESTIGATORS, IT HAS ALWAYS
BEEN FOUND TO BE WITHIN NORMAL LIMITS.
CROTALIN'S ALLEGED EFFICIENCY IS BASED
UPON CHANGED COAGULATION TIME.

HISTORY OF THE COLONY.

PROPOSED BY DR. FREDERICK PETERSON, 1887.

ESTABLISHED BY LAW MAY 12, 1892.

SITE PURCHASED FROM SHAKERS IN 1893.

NAMED FOR HON. OSCAR CRAIG, PRESIDENT STATE
died 1893 BOARD OF CHARITIES

FIRST PATIENT ADMITTED JANUARY, 1896.

PATIENTS ADMITTED TO DATE 4315.

SUPERINTENDENT, DR. WM. T. SHANAHAN.

**IN THREE GENERATIONS OF ANCESTORS OF
THE FIRST 4000 ADMISSIONS TO CRAIG COLONY,
THE FOLLOWING "HEREDITARY FACTORS" WERE
VOLUNTARILY STATED ON THE FAMILY HISTORY
BLANKS.**

Convulsive Disorders (all kinds)	981
Frank Epilepsy	658
Alcoholism	973
Tuberculosis	707
Insanity	403
Paralysis and Apoplexy	357

**HEREDITY IS CERTAINLY ONE OF THE FACTORS IN
THE GENESIS OF MANY OF THE EPILEPSIES.**

FREQUENCY OF BRAIN LESIONS.

**THE CRAIG COLONY HAS RECORDS OF OVER
600 AUTOPSIES ON THE BRAINS OF EPILEPTICS
APPROXIMATELY 60% SHOW GROSS LESIONS.
THESE CASES PRESENT THEMSELVES FOR
PROGNOSIS. MISTAKEN OPTIMISM IS MORE
UNFORTUNATE IN THE END THAN A LITTLE
PESSIMISM.**

BRAIN SURGERY & EPILEPSY.

ILL-ADVISED AND INDISCRIMINATE
OPERATIVE INTERVENTION IN THE EPILEPSIES.
VIEWED FROM ANY POINT IS ILL-JUDGED
ACTIVITY. IN TRAUMATIC CASES THE TIME
TO OPERATE IS BEFORE THE ONSET OF
CONVULSIONS. OPERATIONS ON ACCOUNT
OF APPARENT FOCALITY IN GRAND MAL ATTACKS
SHOULD ONLY BE DONE AFTER THE MOST
SERIOUS CONSIDERATION.

FACTORS CAUSING EPILEPSY IN EARLY LIFE.

EPILEPTICS, IDIOTS, IMBECILES AND HEMIPLEGICS
ARE FREQUENTLY THE DIRECT RESULT OF
BIRTH TRAUMAS.
ENCEPHALITIC PROCESSES, WHICH ARE CAPABLE
OF PERMANENT DAMAGE TO THE BRAIN ARE
OCCURRING WITH UNSUSPECTED FREQUENCY IN
THE COURSE OF THE "COMMON INFECTIOUS
DISEASES" IN CHILDREN.

EPILEPSY AND LONGEVITY.

IN 1271 DEATHS AMONG 4194 ADMISSIONS TO THE CRAIG COLONY, THE AVERAGE AGE AT DEATH WAS 30 YEARS.

THE MORTALITY STATISTICS OF THE U.S. CENSUS GIVES THE NON-EPILEPTIC AVERAGE AGE AT DEATH 40 YEARS.

THESE PREMATURE DEATHS AMONG EPILEPTICS ARE USUALLY ASSOCIATED WITH THE DISORDER ITSELF.

INVESTIGATORS DIFFER AS TO THE ORIGIN OF THE EPILEPSIES.

ALL AGREE THAT THE BRAIN IS THE ACTUAL SEAT OF THE SEIZURE, THEREFORE FINDINGS IN THE BRAINS OF EPILEPTICS BECOME OF GREAT IMPORTANCE.

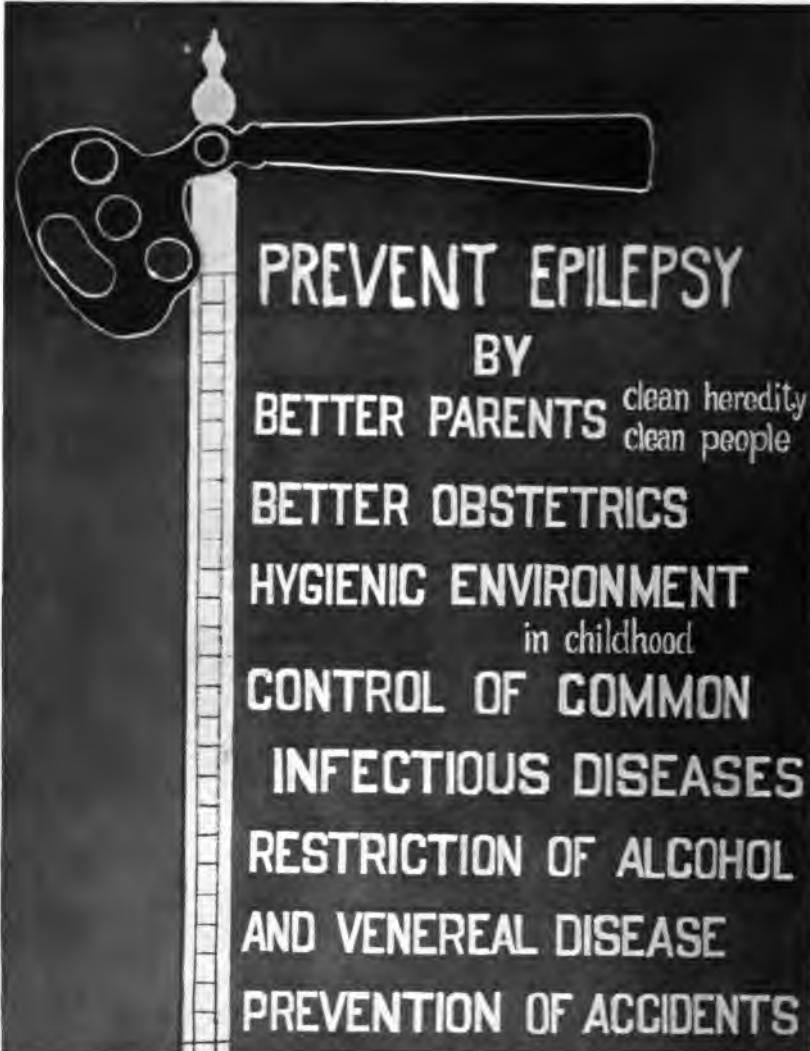
MANY TYPES OF PATHOLOGICAL CONDITIONS ARE FOUND.

OUT OF THE 600 BRAINS EXAMINED AT AUTOPSY AT THE CRAIG COLONY, ONLY A VERY FEW SHOWED ANYTHING THAT MIGHT BE TREATED BY EXCISION.
HEREDITARY TAINTS, ALCOHOLISM AND SYPHILIS CAN NOT BE HELPED BY BRAIN SURGERY.

AT LEAST TWO PERSONS IN EVERY THOUSAND ARE EPILEPTICS.
THERE ARE 200,000 UNCARED FOR EPILEPTICS IN THE UNITED STATES.
LESS THAN 7,000 EPILEPTICS ARE CARED FOR IN SPECIAL INSTITUTIONS.

THE MOST STRIKING AND FREQUENT FINDING IN BRAIN AUTOPSIES AMONG EPILEPTICS IS ENLARGED LATERAL VENTRICLES, AND CYSTIC OR GRANULAR CHOROIDS.

EPILEPSY IS APPARENTLY A SUMMATION OF ETIOLOGICAL QUANTITIES. THE TREATMENT OF ANY ONE CAN NOT BE EXPECTED TO CURE THE DISEASE.



CAUSES OF EPILEPSY

HEREDITY- **ALCOHOL**
EPILEPSY
INSANITY
Feeble-mindedness
MIGRAINE
CONSANGUINITY

GROSS BRAIN LESIONS

TRAUMAS including
BIRTH ACCIDENTS

INTOXICATIONS- **ALCOHOLIC**
METABOLIC
SYPHILITIC

REFLEX IRRITATIONS

VASCULAR CHANGES

MENTAL SHOCKS

DEATH IN EPILEPSY

DIRECTLY RELATED TO EPILEPSY.	513
PNEUMONIAS	303
TUBERCULOSIS	175
CARDIO-VASCULAR-RENAL DISEASE	126
INFECTIONS & INFECTIOUS DISEASES	90
ORGANIC NERVOUS DISEASE	46
GASTRO-INTESTINAL DISORDERS	26
GRAVE CONSTITUTIONAL DISEASES	21
ALL OTHER CAUSES	20
	1320

EPILEPSY PRODUCES
MENTAL FAILURE
EMPLOYMENT, AMUSEMENTS,
AND EDUCATION
DELAY THIS PROCESS





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